Department of Veteran Affairs
Veterans Health Administration
Washington, DC 20420

Replaces VHA Directives 10-94-038 and 10-96-057; replaced by VHA Directive 2002-023, dated Apr. 12, 2002

VHA DIRECTIVE 99-005

February 24, 1999

VHA FY 99 DECISION SUPPORT SYSTEM (DSS) OUTPATIENT IDENTIFIERS
(Ambulatory Care Data Capture)

1. PURPOSE: This Veterans Health Administration (VHA) Directive defines the Decision Support System (DSS) Identifier and the procedures for selection and establishment of DSS Identifiers. ***NOTE: DSS Identifiers are also known as stop codes.*** It is a guide to the operational set-up of Stop Codes or DSS Identifiers by local Department of Veterans Affairs (VA) medical center health administration staff. It informs major users of VHA Ambulatory Data Sets concerning the current descriptions and definitions of VHA outpatient workload centers (production units).

2. BACKGROUND: For more than 20 years VHA has collected ambulatory care data which will support the continuity of patient care, resource allocation, performance measurement, quality management and research, and improve third-party pay or collections. The DSS Identifiers assist VA medical centers in defining outpatient production units, which are critical for costing outpatient VHA work. VHA has been considered ahead of its time by private sector centers using DSS, because VHA has a national coding system for its clinic production units (or work units); it is a very large outpatient care National Integrated Healthcare Network, with a major national outpatient database. In the absence of sufficient Ambulatory Care case-mix indicators, DSS Identifiers or Stop Codes have a value for grouping like-types of care both for economic and resource utilization analysis.

   a. **FY 99 DSS Definitions**

   (1) **Definition of DSS.** DSS assists in business needs. The VHA DSS was purchased from Transition Systems, Inc. Boston, MA, which provides DSS support to most major academic medical centers and hospital systems in the United States, Australia, Sweden, and New Zealand as well as in England, Canada, Netherlands, Taiwan, etc. The business uses of DSS include multi-pay or revenue determination; product and case-costing; resource utilization tracking; quality indicators; and retrospective review of groups of cases in carious quality protocols, reimbursement modeling, annual VA medical center and Veterans Integrated Services Network (VISN) budgeting based on cases provided, and many other uses.

   (2) **Definition of DSS Identifier.** A DSS Identifier is a new VHA term that was effective on October 1, 1996, which characterizes VHA Ambulatory Care Clinics by a six-character descriptor. The DSS Identifier value is transmitted to the National Patient Care Database (NPCD) with each separate outpatient encounter into the NPCD field "DSS Identifier." A primary stop code and a secondary stop code compose the DSS Identifier.

   (a) Primary Stop Code**.** The first three characters of the DSS Identifier represent the primary stop code. The primary stop code designates the main Ambulatory Care Clinical Group or production unit responsible for the clinic. Three numbers must always be in the first three characters of a DSS Identifier for it to be valid.

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(b) <u>Secondary Stop Code</u>. The last three characters of the DSS Identifier contain the secondary stop code. The secondary stop code serves as a modifier to further define the primary work group. The VA medical center uses the secondary stop code when it is appropriate as a modifier of the work in the primary Ambulatory Care work unit (primary stop code). However, a DSS Identifier can have just the first three characters.

1. The secondary stop code modifier can represent the type of <u>services</u> provided. A Diabetes Specialty Clinic, for example, that also gives Primary Care services to Diabetic patients would have a DSS Identifier, <u>306</u> Diabetes (the primary stop code to designate the work group) and <u>323</u> Primary Care Medicine (the secondary stop code to designate the services provided).

2. The secondary stop code modifier can represent the <u>type of provider or team</u>. An example is in Primary Care Team clinic run by a Nurse for Health Education can be designated <u>323117</u>.

3. The secondary stop code modifier can also represent a <u>specially funded program.</u> An example is an Alcohol Abuse clinic within a Substance Abuse work group would be <u>513</u> (Substance Abuse Individual Counseling), <u>461</u> (Alcohol Specially-funded Program).

(c) <u>The NPCD.</u> The NPCD (from FY 97 onward) creates a Statistical Analysis System (SAS) file in Austin Automation Center (AAC) that includes, for each outpatient encounter, a six-character DSS Identifier, and a field for each primary stop code and secondary stop code components. This is reported for the SC file (an Austin outpatient SAS file that lists outpatient encounters by Current Procedural Terminology (CPT) code with the six character DSS Identifier for each encounter) of the AAC Outpatient Clinic (OPC) SAS file. This will enable national database users to search on the secondary stop code modifier for additional workload provided by an Ambulatory Care work group. For example, a search on stop code 323 (Primary Care Medicine) used as the secondary stop code would provide additional Primary Care workload for national analyses from the SC file of the OPC SAS file. (The SF file (another Austin outpatient SAS file that lists daily outpatient encounters by Social Security Number (SSN) and by primary stop code) puts primary and secondary each as a separate stop in the stop code column.) ***NOTE:*** *NPCD outpatient encounters are reported for workload using only the primary DSS identifier.*

(3) **Importance of DSS Identifier**s. The DSS Identifier (formerly called primary and secondary stop code pair) performs an excellent service. DSS Identifiers (formerly called stop codes) are single and critical designation by which VA defines outpatient production units or clinical work units. For Medicare cost reports, VA needs to have production units in the clinic or "Ambulatory Care Revenue Centers." DSS Identifiers have been used to designate these medicine work units for outpatients.

(a) <u>Standardization.</u> For this reason, and many others, it has become increasingly important that VA medical centers standardize their use of DSS Identifiers and not deviate from nationally directed standards, especially in critical areas like Ambulatory Surgery, Primary Care and Observation; i.e., the three areas of the special field DSS Stop Code Task Force Study Group in FY 98.

(b) <u>Relationship to the Cost Distribution Report (CDR).</u> For FY 97 and thereafter, the CDR extracts only the primary stop code of the six character DSS Identifier for CDR work purposes.

It is very important that the primary stop code is consistent with this Directive.

(4) **Basis of DSS Identifiers and a Major Principle of DSS Identifier Set-up in FY 99**

(a) A major clarification in the future use of VHA stop codes was made at the final Ambulatory Care Redesign meeting in November 1995, in the Medical Care Cost Fund (MCCF) Program Offices in Washington, DC.

1. Health Administration Service (HAS), DSS, and others stated that from FY 97 onward, the use of stop codes would be focussed on two important purposes:

a. To indicate the outpatient work group (or production unit) which was responsible for providing the specific set of clinic products, and

b. To serve as stable, VA medical center-specific, products which could be used to compare costs between sites over the years when attached to a value for scheduled-time and other modifiers; i.e., as the DSS feeder key for Ambulatory Care products.

2. As of FY 97, the diagnostic information for Ambulatory Care patients would come from International Classification of Disease, 9th Edition (ICD-9) codes; and billing code functionality would come from the billing codes that are currently used by the Health Care Finance Administration (HCFA), CPT codes for outpatient facility and provider. This would permit the VHA to conform in its MCCF billing with the private sector billing practice.

(b) Many VHA national database users actively use the DSS Identifiers for workload searches to indicate the general type of work, as well as the type of production unit creating this work: CDR; VHA reimbursement office, i.e., Allocation Resource Center-Veterans Equitable Resource Allocation (ARC-VERA); clinical program offices; Health Service Research and Development (HSR&D); and National VHA Performance Measures. Others depend on VHA stop codes, and the stability and reliability of these stop codes to represent similar work for outpatient care in VHA National Databases over the years.

b. **Caution on Use of the Autobiller Function**

(1) It is critically important that VA medical centers not bill for work not performed or for work not eligible for reimbursement. Sites have the ability to make a stop code or a clinic "NOT AUTOBILLED." This means that bills would not be created by the autobiller, but does not necessarily mean these clinics are not billable, and bills could be created by the billers. The "NOT AUTOBILLED" option may be a useful tool in the future for global services.

(2) A list of DSS Identifiers and/or credit pairs (stop codes) that should be always marked as "Not Billable" is in Attachment M. All products (clinics) with these identifiers **are not to be billed**. These include the Telephone Clinics, Research, and the Employee, Women's Stress, and Sexual Trauma counseling stops.

(3) All products (clinic names) on the "Sometimes Not-Billable" List of DSS Identifiers, in Attachment N, should be carefully reviewed by MCCF, Health Information

Management Systems (HIMS), and DSS to determine if the <u>clinics</u> should be marked as "not billable." Close attention should be paid to the treatment that was actually provided and the level of the professional in attendance for clinics with these stop codes. In some states billing may be possible, in other states certain counseling professionals cannot be billed.

(4) The issue of billing for global services needs to be addressed when reasonable charges go into effect for the all pre-bed stop codes (331, 221, 416, 419, 422, 432, 433).

d. **<u>Use of Stop Codes in VA Medical Centers with Text Integration Utility (TIU) or Clinic Patient Record System (CPRS)</u>**

(1) **Initiation.** In FY 99, several VA medical centers will start to use TIU which is a prerequisite for CPRS.

(2) **Problems with Unscheduled Visits on TIU.** When a VA medical center outpatient provider is using the Event Capture System (ECS) to send data to Patient Care Encounter (PCE) automatedly, a problem is encountered if a TIU unscheduled visit is made for the same patient. The TIU requires the provider to enter a visit before the progress note can be done, so a second visit (equals an outpatient encounter on DSS) will be made for the same stop for the same day and provider, when the ECS automated entry option is used.

(a) On DSS this does not represent a problem because:

<u>1</u>. All the clinic utilization for the same SSN on the same day for the same primary stop code is reported to only one encounter.

<u>2</u>. The products coming from the DSS clinic (CLI) Extract, should be already "stats only" and the ECS products are and should be used for the only Department Cost Manager (DCM)-costed products.

(b) However, for HAS and for PCE, this required function of TIU effectively results in double counts for TIU-users, in clinics sending data to PCE from ECS.

(3) **Solution to the TIU Unscheduled Visit Problem**

(a) <u>Option One.</u> Option one is for the VA medical center HAS to create a second, non-count HAS clinic for TIU-users to write notes for unscheduled patients. The original count clinic stop code should be used only for data coming to PCE from ECS.

(b) <u>Option Two.</u> Option two is to allow both TIU-created unscheduled visits and ECS data and/or cost visits to enter PCE as separate encounters for the same SSN, same primary stop on the same day. This requires no action by the VA medical center's HAS.

(4) **For VA Medical Centers with TIU and/or CPRS, New HAS Set-up for Simultaneous Data Entry into ECS and into TIU Progress Notes.** To enhance single-entry and sign-on functionality for VA medical centers using TIU (with CPRS and ECS data entry), DSS-Troy has provided guidelines on how to set-up a menu template to help you as a provider, set-up a TIU - ECS-combined menu so one can go directly from entry of a TIU progress note to entry of an ECS procedure.

e. <u>**Use of DSS Identifiers**</u>

(1) VHA is moving toward Patient Care Service Lines and, like the private sector, is moving toward provider-led practice groups or teams to provide coordinated comprehensive managed care to their team's panel of patients.

(2) DSS Identifiers are markers for VHA Ambulatory Care Production Units like Medicare Revenue Centers. DSS identifiers, or stop codes, serve as guides to DSS outpatient department structures.

(3) In keeping with this critical role of DSS identifiers to identify the VA medical center clinical care group, or clinic production unit, providing outpatient care to the patient, this DSS Directive to capture Ambulatory Care Data, is developed in service lines sets as follows:

100 – 299	Ancillary and General Support Services
300 – 399	Medicine and Primary Care Services
400 – 449	Surgical Services
500 – 599	Mental Health Services
450 – 499 and 600 – 999	Other

NOTE: The FY 99 National Stop Code Task Force was sub-divided into five sub-task forces for each of these areas in order to review the results of the Field "FY 99" Stop Code Survey, circulated in January 1998, and develop strategic responses. These professionals discussed, analyzed and developed solutions for many of the identified problems. Some work was deferred to FY 2000 work for next fiscal year's DSS Identifier amendments.

f. <u>**Method to Request New DSS Identifiers.**</u> The process for requesting a change or modification in DSS Identifier use or definition is to work with the relevant VHA Headquarters Clinical Program Office, to submit a request to the DSS Program Office at the Bedford Technical Support Office, c/o Dr. Elisabeth McSherry, M.D. and Roy Mitchell, by MS Exchange, Forum E-mail, Troy E-mail, or by Fax at 781-275-5416. The request will then be reviewed for technical impact, and referred to the field-based, DSS Identifier Task Force for consideration and prioritization.

g. **Relationship the Veterans Health Information Systems Technology Architecture (VISTA) HAS Stop Code Files with AAC.** Annually, all new stop code changes outlined in numbered administrative issues, are updated in HAS files and AAC edits. *NOTE: These software files do not contain the full definitions, but otherwise should reflect the current code numbers and short definitions as summarized in the current directive.*

3. POLICY: It is VHA policy that the procedures for the selection and management of the VHA DSS Identifier system apply to all field facilities.

4. ACTION: All HAS DSS Identifiers are to match all DSS worksheet DSS Identifiers at least in the primary position at each VA medical center. Matching in all six characters is recommended. This applies to all clinics that are "count" clinics for DSS.

a. It is most important that VA medical centers and VISNs use DSS Identifiers in a standard and consistent manner: for national VHA and network VISN comparison purposes; for ease in automating the new DSS-developed template for outpatient facility Medicare and HCFA Cost Reporting; for the current national VHA CDR; for reliable benchmarking and outpatient contract cost predictions. Full adherence to the FY 99 DSS Identifier set up instructions is expected. DSS Identifiers will be updated annually. *NOTE: The next release of Table A and Table F after the October 1, 1998, FY 99 release, will be for FY 2000 (October 1, 1999).*

(1) In FY 99, the VA medical center HAS should ensure that the HAS DSS Identifiers for each clinic are in concurrence with the DSS Site Manager's DSS Identifiers from the DSS worksheet. It is critical that the DSS Identifier resource utilization from the DSS clinic worksheet be the same as the clinic's DSS Identifier provided by HAS. This is necessary because the DSS identifier of the clinic (used by VA medical center HAS) creates the DSS Medical Record encounter to which the DSS Identifier from the DSS worksheet must send the costed intermediate product from the DSS CLI Extract and other case resource utilization. To create the most appropriate cost products for Ambulatory Care, DSS Identifiers (from both HAS and the DSS worksheet) should match.

(2) In FY 99, local stops 450 through 485 should only be used in the secondary stop code position for clinic reported workload that is sent to DSS as indicated on the DSS worksheet by any DSS Action Code other than #6 (not sent to DSS). If the work is "non-count" to HAS, but "count" to DSS, this applies. In the case of a clinic set up for inpatient only, for example, where HAS considers the clinic non-count, DSS would always designate such a clinic a count clinic.

(3) The only exception is for a clinic set up to be "non-count" for both HAS and for DSS. Then local stops 450 through 485 would be permitted in the primary position.

NOTE: See Table F for a complete listing of all October 1, 1998 DSS Identifiers and their specific definitions.

b. Use the attachments to further enable the use of DSS Indentifiers at each facility. The attachments are listed as follows:

(1) **Attachment A.** Glossary of Acronyms.

(2) **Attachment B.** Current Active DSS Identifiers (Table A).

(3) **Attachment C.** Summary of 10/1/98 Changes in DSS Identifiers (Table B).

(4) **Attachment D.** Existing Primary Stop Code Definition Changes (Table C).

(5) **Attachment E.** Existing Secondary Stop Code Identification Changes (Table D).

(6) **Attachment F** Stop Codes 100-299 Series Including Observation (290-299).

(7) **Attachment G.** Stop Codes 300 Series, Definitions for Primary Care.

(8) **Attachment H.** Stop Code 400 Series, Ambulatory Surgery Data Reporting.

(9) **Attachment I.** Stop Code 500-999 Series, Mental Health and Other.

(10) **Attachment J.** Complete Summary of October 1, 1998, Active Stop Codes (Table F).

(11) **Attachment K.** Ancillary Stop Codes and Medical Administration Exempt Stop Codes.

(12) **Attachment L.** Telephone Stop Code List.

(13) **Attachment M.** Always Non-Billable DSS Identifiers.

(14) **Attachment N.** Sometimes Non-Billable DSS Identifiers.

    (15) **Attachment O.** Fiscal Year 1999 Short Description Decision Support System (DSS) National Suffixes for Use with DSS Identifier Credit Pairs as Feeder Keys for DSS Intermediate Products.
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    (16) **Attachment P.** Fiscal Year 1999 National Alpha Code Description Decision Support System (DSS) National Suffixes for Use with DSS Identifier Credit Pairs as Feeder Keys for DSS Intermediate Products.

    (17) **Attachment Q.** Event Capture and/or Text Integration Utility Menu Template.

5. REFERENCES

a. American Society for Testing and Materials, Standard E1384-91.

b. National Committee for Vital and Health Statistics, Uniform Ambulatory Medical Care Minimum Data set.

c. M-1, Part I, Chapter 16.

6. FOLLOW-UP RESPONSIBILITY: The Office of the Chief Information Officer, DSS Program Office (194) is responsible for the contents of this directive. Questions may be referred to (781) 275-9175, extension 126.

7. RESCISSIONS: VHA Directive 10-94-038 and VHA Directive 10-96-057 with all its changes are rescinded. This VHA Directives expires February 24, 2004.

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S/ by Robyn Nishimi, Ph.D. for
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Under Secretary for Health

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Attachments

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ATTACHMENT A

GLOSSARY OF ACRONYMS

AAC	Austin Automation Center	(Where most VHA National database are housed.)
AD	Alzheimer's Disease	
ADAM	Aneurysm Detection and Management	
AEP	Auditory Evoked Potential	
AICS	Ambulatory Information Capture System	
AMIS	Automated Medical Information System	
ANP	Advanced Nurse Practitioner	
ARC	Allocation Resource Center	

BROS   Blind Rehab Outpatient Specialist

CAD   Computer Aided Design
CAM   Computerized Aided Modeling
CAT   Computer Assisted Training
CDR   Cost Distribution Report
C&P   Compensation and Pension
CMRS   Computerized Medical Record System
CPRS   Clinic Patient Record System
CPT   Current Procedural Terminology
CT   Computerized Tomography
CWT   Compensated Work Therapy

DCHV   Domiciliary Care for Homeless Veterans
DCM   Department Cost Manager   (production unit reporting part of DSS)
DOM   Domiciliary
DSS   Decision Support System

EAP   Employee Assistance Program
ECS   Event Capture System (a generic resource utilization package in VISTA Class I software)
EEG   Electroencephalogram
EKG   Electrocardiogram
EMG   Electromyogram
ENT   Ear, Nose, and Throat
ETT   Exercise Tolerance Test

FY   Fiscal Year

GEM   Geriatric Evaluation and Management
GI   Gastrointestinal

HAS   Health Administration Services
HBHC   Hospital Based Home Care

HBPC	Home Based Primary Care
HCFA	Health Care Finance Administration
HCHV	Health Care for Homeless Veterans
HCMI	Homeless Chronically Mentally Ill
HIMS	Health Information Management Systems
HIV	Human Immunodeficiency Virus
HMI	Homeless Mentally Ill
HSR&D	Health Service Research and Development
HUD	Department of Housing and Urban Development
ICCM	Intensive Community Case Management
ICD-9	International Classification of Disease, 9th Edition – Clinical Modification
IPCC	Intensive Psychiatric Community Care
LPN	Licensed Practical Nurse
MAS	Medical Administration Service
MCCR	Medical Care Cost Recovery Program (also known as MCCF)
MCCF	Medical Care Cost Funding Program (also MCCR)
MD	Medical Physician
MH	Mental Health
MRI	Magnetic Resonance Imaging
MSDU	Medical Surgical Day Unit
NEPEC	New England Psychiatric Evaluation Center
NPCD	National Patient Care Database
OOS	Occasions of Service
OPC	Outpatient Clinic
OPT	Outpatient Therapy
OR	Operating Room
PA	Physician Assistant
PCE	Patient Care Encounter (tracking), a VHA Ambulatory Care VistA database
PCMM	Primary Care Management Module
PCT	PTSD Clinical Team
PEC	Patient Event Capture
PET	Position Electron Transformation
PM&RS	Physical Medicine & Rehabilitation Service
PPD	Purified Protien Derivative (Tuberculosis)
PSI	Psychiatry
PSO	Pschology
PRRTP	Psychiatric Resident Rehabilitation Treatment Program
PTF	Patient Treatment File – (An AAC-based Inpatient database, also a VA medical center VISTA file).
PTSD	Post-traumatic Stress Disorder
Pub. L.	Public Law

SAS   Statistical Analysis System
SC   An Austin outpatient SAS report that lists outpatient encounters by CPT code.
SF   An Austin outpatient SAS report that lists outpatient encounters by primary stop
      code and credit pair.
SCI   Spinal Cord Injury
SSN   Social Security Number
STRAF Special Therapeutic and Rehabilitation Activities Fund

RSCH Research
RN   Registered Nurse
RPN   Registered Nurse Practitioner

TIU   Text Integration Utility (a subfunction of the VHA VISTA CMRS)
TR   Transitional Residence

U.S.C.   United States Code

VA   Department of Veterans Affairs
VASH   VA Shared Housing
VEP   Visual Evoked Potential
VERA   Veterans Equitable Resource Allocation
VHA   Veterans Health Administration
VIST   Veterans Impairment Service Team
VISTA   Veterans Health Information Systems Technology Architecture
VISN   Veterans Integrated Systems Network

ATTACHMENT B
CURRENT ACTIVE DSS IDENTIFIERS (10/1/98).

  a. Current Table A is the list of all current Decision Support System (DSS) Identifier numbers and names. *NOTE: See Table F for descriptions of these DSS Identifiers.*

NOTE: The following symbols are used in this Attachment:

* Not applicable to Cost Distribution Report (CDR), Automated Medical Information System (AMIS) segment J-19 is used by CDR currently for workload
** Amended use of a DSS Identifier
+ Changed DSS Identifier description
++   New DSS Identifier
‡ Added or changed DSS Identifier CDR account
- Inactivated DSS Identifier
$^{\psi}$ Work from these stop codes is always <u>non-billable</u> in Medical Care Cost Recovery (MCCR)

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/98)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
	101**	EMERGENCY UNIT (Use as a secondary stop code only, effective 10/1/97).
102		ADMITTING/SCREENING
103$^{\psi}$		TELEPHONE TRIAGE
104		PULMONARY FUNCTION
105		X-Ray
106		Electrocephalogram (EEG)
107		Electrocardiogram (EKG)
	107473	ECHOCARDIOGRAM
108		LABORATORY
109		NUCLEAR MEDICINE
115		ULTRASOUND
116++		RESPIRATORY THERAPY
	116329++	RESPIRATORY THERAPY PROCEDURES
117		NURSING
	117473	Purified Protien Derivative (PPD) (Tuberculosis) CLINIC
	117710	FLUSHOT
118		HOME TREATMENT SERVICES
119		COMMUNITY NURSING HOME FOLLOW-UP
120		HEALTH SCREENING
121+		RESIDENTIAL CARE (NON-Mental Health (MH))
122		PUBLIC HEALTH NURSING

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/98) (cont.)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
123+		NUTRITION/DIETETICS/INDIVIDUAL
124+		NUTRITION/DIETETICS/GROUP
125		SOCIAL WORK SERVICE
126		EVOKED POTENTIAL
127		TOPOGRAPHICAL BRAIN MAPPING
128		PROLONGED VIDEO-EEG MONITORING
144		RADIONUCLIDE THERAPY
145		PHARMACOLOGY/PHYSIOLOGIC NUCLEAR MYOCARDIAL PERFUSION STUDIES
146		Position Electron Transformation (PET)
147$^\psi$		TELEPHONE/ANCILLARY
	147209++$^\psi$	TELEPHONE Visual Impairment Services Team (VIST)
148$^\psi$		TELEPHONE/DIAGNOSTIC
149		RADIATION THERAPY TREATMENT
150		COMPUTERIZED TOMOGRAPHY (CT)
151		MAGNETIC RESONANCE IMAGING (MRI)
152		ANGIOGRAM CATHETERIZATION
153		INTERVENTIONAL RADIOGRAPHY
160		CLINICAL PHARMACY
165		BEREAVEMENT COUNSELING
166		CHAPLAIN SERVICE – INDIVIDUAL
167		CHAPLAIN SERVICE - GROUP
168		CHAPLAIN SERVICE - COLLATERAL
169$^\psi$		TELEPHONE/CHAPLAIN
170+		Hospital Based Primary Care (HBPC) - PHYSICIAN
171+		HBPC – Registered Nurse (RN)/Registered Nurse Practitioner (RNP)/ Physician Assistant (PA)
172+		HBPC - NURSE EXTENDER
173+		HBPC - SOCIAL WORKER
174+		HBPC – THERAPIST
175+		HBPC - DIETITIAN
176+		HBPC - CLINICAL PHARMACIST
177+		HBPC - OTHER
	177201+	HBPC- Physical Medicine & Rehabilitation Service (PM&RS)
	177210+	HBPC- Spinal Cord Injury (SCI)
178$^\psi$		HBPC/TELEPHONE
180+		DENTAL
181$^\psi$		TELEPHONE/DENTAL

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/98) (cont.)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
190		ADULT DAY HEALTH CARE
201		PM & RS
202		RECREATION THERAPY SERVICE
203		AUDIOLOGY
204		SPEECH PATHOLOGY
205		PHYSICAL THERAPY
206		OCCUPATIONAL THERAPY
207		PM&RS INCENTIVE THERAPY
208		PM&RS COMPENSATED WORK THERAPY (CWT)
	208466$^{\psi}$	Domiciliary (DOM) CWT
209+		VIST COORDINATOR
	209125++	VIST COORDINATOR BY SOCIAL WORKER
210		SPINAL CORD INJURY
	210414	SCI-CYSTOURO
	210468	SCI-RN PROCEDURE
211		AMPUTATION FOLLOW-UP CLINIC
212		EMG - Electromyogram
213		PM&RS VOCATIONAL ASSISTANCE
	213466$^{\psi}$	Veterans (VETS) Education (ED)/Training (TRNG) DOM
214		KINESIOTHERAPY
215		SCI HOME CARE PROGRAM
216$^{\psi}$		TELEPHONE Rehabilitation (REHAB) AND SUPPORT
	216203++$^{\psi}$	TELEPHONE AUDIOLOGY REHAB SUPPORT SVC
	216204++$^{\psi}$	TELEPHONE SPEECH REHAB SUPPORT SERVICE
	216210$^{\psi}$	SPINAL CORD INJURY TELEPHONE SUPPORT
217		BLIND REHAB OUTPATIENT SPECIALIST (BROS)
218++		Computer Assisted Training (CAT) BLIND REHAB
290+		OBSERVATION MEDICINE
291+		OBSERVATION SURGERY
292		OBSERVATION PSYCHIATRY
293+		OBSERVATION NEUROLOGY
294		OBSERVATION BLIND REHAB
295		OBSERVATION SPINAL CORD
296		OBSERVATION REHABILITATION
301		GENERAL INTERNAL MEDICINE
302		ALLERGY IMMUNOLOGY
303		CARDIOLOGY
	303201	CARD REHAB
(inactivate)	303329 -	CARDIAC CATH (see new DSS ID 333)

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/98) (cont.)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
304+		DERMATOLOGY
	304416	DERM PHOTO THERAPY
305+		ENDO METAB (EXCEPT DIABETES)
306		DIABETES
	306117	DIABETES EDUCATION
307		GASTROENTEROLOGY
	307117	ENTEROSTOMAL CLINIC
	307454	LIVER
308		HEMATOLOGY
309		HYPERTENSION
310		INFECTIOUS DISEASE
311		PACEMAKER
312		PULMONARY/CHEST
313+		RENAL/NEPHROL(EXCEPT DIALYSIS)
	313457	TRANSPLANT
314		RHEUMATOLOGY/ARTHRITIS
315		NEUROLOGY
	315456	EPILEPSY
	315469	MOVEMENT DISORDER
	315470	SLEEP DISORDER
316		ONCOLOGY/TUMOR
	316149	Radiology (RAD) RX (WITH ONCOLOGY MEDICINE SERVICE)
	316329++	ONCOLOGY/TUMOR PROCEDURES
317		COUMADIN CLINIC
318		GERIATRIC CLINIC
319		GERIATRIC EVALUATION AND MANAGEMENT (GEM) CLINIC
320		ALZHEIMER'S AND DEMENTIA CLINIC
321+		Gastrointestinal (GI) ENDOSCOPY
322		WOMEN'S CLINIC
323		PRIMARY CARE/MEDICINE
324$^\psi$		TELEPHONE/MEDICINE
325$^\psi$		TELEPHONE/NEUROLOGY
326$^\psi$		TELEPHONE/GERIATRICS
327+		MED Physician (MD) PERFORM INVASIVE Operating Room (OR) Procedure (PROC)
328		MEDICAL SURGICAL DAY UNIT (MSDU)
329+		MEDICAL PROCEDURE UNIT

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/98) (cont.)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
330		CHEMOTHERAPY PROCEDURES UNIT MEDICINE
331		PRE-BED CARE Physician (MD) (MEDICAL SERVICE)
332+		PRE-BED CARE RN (MEDICAL SERVICE)
333++		CARDIAC CATHETERIZATION
334++		CARDIAC STRESS TEST/Exercise Tolerance Test (ETT)
350		GERIATRIC PRIMARY CARE
401		GENERAL SURGERY
402		CARDIAC SURGERY
403		Ear, Nose, and Throat (ENT)
404		GYNECOLOGY
405		HAND SURGERY
406		NEUROSURGERY
407		OPHTHALMOLOGY
408		OPTOMETRY
409		ORTHOPEDICS
410		PLASTIC SURGERY
	410210	SCI PLASTIC
411		PODIATRY
412		PROCTOLOGY
413		THORACIC SURGERY
414		UROLOGY
	414451	IMPOTENCY
	414473	URODYNAMICS
415		VASCULAR SURGERY
	415461+	ADAM CLINIC – Aneurysm Detection And Management
416		AMBULATORY SURGERY EVALUATION BY NON-MD
417		PROSTHETIC, ORTHOTICS: EVAL/FITTING/MEASURING
	417201	MAJOR MED
	417451	WHEEL CHAIR
	417452	CUSHION
	417455	SHOE/BRACE
	417473 –	ORTHOTIC LAB
	417474 –	PROSTHETICS LAB
418		AMPUTATION CLINIC
419		ANESTHESIA PRE-OP/POST-OP CONSULT
420		PAIN CLINIC
421		VASCULAR LABORATORY
422		CAST CLINIC

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/98) (cont.)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
423+		PROSTHETIC SUPPLY ORDERING SERVICES
	423461	Computer Aided Design (CAD) Computer Aided Modeling (CAM) UNIT
424ψ		TELEPHONE/SURGERY
425ψ		TELEPHONE/PROSTHETICS/ORTHOTICS
426		WOMEN'S SURGERY
428ψ		TELEPHONE/OPTOMETRY
429		OUTPATIENT CARE IN THE OPERATING ROOM
430		CYSTO ROOM UNIT FOR OUTPATIENT
431		CHEMOTHERAPY PROCEDURES UNIT-SURGERY
432		PRE-BED CARE MD (SURGICAL SERVICE)
433		PRE-BED CARE RN (SURGERY)
435+		SURGICAL PROCEDURE UNIT
	450485	Use as credit pairs only.
	450	Compensation and Pension (C&P) EXAM (available in FY 97)
	451	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	452	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	453	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	454	SPECIAL REGISTRY 5
	455	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	456	SPECIAL REGISTRY 6
	457	TRANSPLANT
	458	SPECIAL REGISTRY 7
	459	SPECIAL REGISTRY 8
	460	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	461	SPECIAL REGISTRY 1
	462	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	463	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	464	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	465	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	466	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	467	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	468	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	469	SPECIAL REGISTRY 2
	470	SPECIAL REGISTRY 3
	471	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	472	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	473	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	474	RESEARCH

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/98) (cont.)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
	475	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	476	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	477	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	478	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	479	SPECIAL REGISTRY 4
	480+	COMPREHENSIVE FUNDOSCOPY EXAM This DSS identifier may only be used in the credit position. It is primarily to be used with identifiers 301, 305, 306, 309, 323, 350, 407 and 408 whenever a comprehensive fundoscopic examination is performed, i.e., for patients with diabetes or hypertension; however, it may be used in conjunction with any other DSS identifier should the need arise.
	481+	BRONCHOSCOPY
	429481	**If Outpatient Bronchoscopy is done by Surgery in the OR**
	312481	**If Outpatient Bronchoscopy is done in the Pulmonary Area**
	327481	**If Outpatient Bronchoscopy is done by Medicine in the OR**
	329481	**if Outpatient Bronchoscopy is done in the Medical Procedure Unit**
	435481	if Outpatient Bronchoscopy is done in "Lumps and Bumps" Surgery Procedure Unit
	482	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	483	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	484	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	485	SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
501 -		HOMELESS MENTALLY ILL OUTREACH
502		MENTAL HEALTH CLINIC INDIVIDUAL
503+		MENTAL HEALTH RESIDENTIAL CARE INDIVIDUAL
505+		DAY TREATMENT - INDIVIDUAL
506+		DAY HOSPITAL – INDIVIDUAL
509+		PSYCHIATRY MD INDIVIDUAL
510		PSYCHOLOGY - INDIVIDUAL
	510473+	NEURO PSYCHOLOGY LAB
	510474++ψ	PSYCHOLOGY RESEARCH
	510475 -	RESEARCH (USE 510-474)
	510509	Psychology – Psychiatry (PSO-PSI)
512		PSYCHIATRY CONSULTATION
513		SUBSTANCE ABUSE – INDIVIDUAL
	513461	INDIVIDUAL SUBSTANCE ABUSE: ALCOHOL DEPENDENCE

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/98) (cont.)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
	513469	INDIVIDUAL SUBSTANCE ABUSE: DRUG DEPENDENCE
514		SUBSTANCE ABUSE - HOME VISIT
515 -		CWT/Transitional Residence (TR)-Homeless Chronically Mentally Ill (HCMI)
516		Post Traumatic Stress Disorder (PTSD) – GROUP
	516726+	PTSD DOM-AFTERCARE GROUP
519		SUBSTANCE USE DISORDER/PTSD TEAMS
520+		LONG-TERM ENHANCEMENT INDIVIDUAL
521		LONG-TERM ENHANCEMENT - GROUP
522		Department of Housing and Urban Development (HUD)-VA Shared Housing (VASH)
523		OPIOID SUBSTITUTION
524+ψ		ACTIVE DUTY SEX TRAUMA
525ψ		WOMEN'S STRESS DISORDER TREATMENT TEAMS
527ψ		TELEPHONE/GENERAL PSYCHIATRY
	527564++ψ	TELEPHONE – Intensive Community Care Management (ICCM)
528ψ		TELEPHONE/HOMELESS MENTALLY ILL (HMI)
529		Health Care for Homeless Veterans (HCHV)/HMI
530ψ		TELEPHONE/HUD-VASH
531+		MENTAL HEALTH PRIMARY CARE TEAM-INDIVIDUAL
532+		PSYCHOSOCIAL REHABILITATION-INDIVIDUAL
535		MH VOCATIONAL ASSISTANCE-INDIVIDUAL
536ψ		TELEPHONE/ MH VOCATIONAL ASSISTANCE
537ψ		TELEPHONE/ PSYCHOSOCIAL REHABILITATION
540		PTSD ClinicalTeam (PCT) POST -TRAUMATIC STRESS-INDIVIDUAL
542ψ		TELEPHONE/PTSD
545ψ		TELEPHONE/SUBSTANCE ABUSE
	545461ψ	TELEPHONE/SUBSTANCE ABUSE-ALCOHOL DEPENDENCE
	545469ψ	TELEPHONE SUBSTANCE ABUSE-DRUG DEPENDENCE
546ψ		TELEPHONE/IPCC
547		INTENSIVE SUBSTANCE ABUSE TREATMENT
	547461	INTENSIVE SUBSTANCE ABUSE TREATMENT - ALCOHOL DEPENDENCE
	547469	INTENSIVE SUBSTANCE ABUSE TREATMENT - DRUG DEPENDENCE

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/98) (cont.)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
550+		MENTAL HEALTH CLINIC (GROUP)
552+		Intensive Psychiatric Community Care (IPCC) COMMUNITY VISIT
553+		DAY TREATMENT – GROUP
554+		DAY HOSPITAL-GROUP
557		PSYCHIATRY - GROUP
558		PSYCHOLOGY - GROUP
559		PSYCHOSOCIAL REHABILITATION - GROUP
560		SUBSTANCE ABUSE - GROUP
	560461	GROUP SUBSTANCE ABUSE: ALCOHOL DEPENDENCE
	560469	GROUP SUBSTANCE ABUSE: DRUG DEPENDENCE
561		PCT-POST TRAUMATIC STRESS – GROUP
562		PTSD – INDIVIDUAL
563+		MENTAL HEALTH PRIMARY CARE TEAM – GROUP
564++		INTENSIVE COMMUNITY CASE MANAGEMENT (ICCM)
573		MH INCENTIVE THERAPY-GROUP
574+		MH COMPENSATED WORK THERAPY – GROUP
	574513 -	CWT/ SUBSTANCE ABUSE
575		MH VOCATIONAL ASSISTANCE - GROUP
576		PSYCHOGERIATRIC CLINIC, INDIVIDUAL
577		PSYCHOGERIATRIC CLINIC, GROUP
578		PSYCHOGERIATRIC DAY PROGRAM
579$^{\psi}$		TELEPHONE/ PSYCHOGERIATRICS
580+		PTSD DAY HOSPITAL
581+		PTSD DAY TREATMENT
589++		NON-ACTIVE DUTY SEX TRAUMA
590		COMMUNITY OUTREACH HOMELESS VETS BY STAFF
		OTHER THAN HCHV AND Domiciliary Care for Homeless Veterans (DCHV) PROGRAMS
602		CHRONIC ASSISTED HEMODIALYSIS TREATMENT HEMODIALYSIS TREATMENT
603		LIMITED SELF CARE HEMODIALYSIS TREATMENT
604		HOME/SELF HEMODIALYSIS TRAINING TREATMENT
606		CHRONIC ASSISTED PERITONEAL DIALYSIS
607		LIMITED SELF CARE PERITONEAL DIALYSIS
608		HOME/SELF PERITONEAL DIALYSIS TRAINING
610		CONTRACT DIALYSIS

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/98) (cont.)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
611$^\psi$		TELEPHONE/DIALYSIS
	701711*	*USE AS CREDIT PAIRS ONLY, EFFECTIVE 10/1/97.
	701	HYPERTENSION SCREENING
	702	CHOLESTEROL SCREENING
	703	MAMMOGRAM
	704	PAP TEST
	705	FOBT - GUIAC SCREENING
	706	ALCOHOL SCREENING
	707	SMOKING CESSATION
	708	NUTRITION
	709	PHYSICAL FITNESS/EXERCISE COUNSELING
	710	INFLUENZA IMMUNIZATION
	711	INJURY COUNSEL/SEAT BELT USAGE
725		DOMICILIARY OUTREACH SERVICES
726		DOMICILIARY AFTERCARE – COMMUNITY
727		DOMICILIARY AFTERCARE - VA
728		DOMICILIARY ADMISSION SCREENING SERVICES
729$^\psi$		TELEPHONE/DOMICILIARY
730++		DOMICILIARY – GENERAL CARE (Event Capture System (ECS)) USE ONLY)
731++		Psychiatric Rehabilitation Residential Treatment Program (PRRTP) – GENERAL CARE (ECS USE ONLY)
900 - Inactivate 10/1/98		SPECIAL SERVICES
999$^\psi$		EMPLOYEE HEALTH
	999510$^\psi$	PSO-Employee Assistance Program (EAP) - **OPTIONAL**

ATTACHMENT C

SUMMARY OF 10/1/98 CHANGES IN DSS IDENTIFIERS

NOTE: The following symbols are used in this attachment: **   Amended use of a Decision Support System (DSS) Identifier; ᵠ Work from these stop codes is always <u>non-billable</u> in Medical care Cost Recovery (MCCR)

a. **Table B   New Stop Codes Added**

DSS ID NUMBER	DSS ID PAIR	CDR	DESCRIPTION
116		2110.00	RESPIRATORY THERAPY. Records patient visit for Respiratory Therapy services, including treatment and/or education in use of treatment modalities. (Use code 312 for other pulmonary care.)
	147209ᵠ		TELEPHONE Visual Impairment Services Team (VIST)
	209125		VIST Coordinator duties performed by Social Worker
	216203ᵠ		TELEPHONE AUDIOLOGY Rehabilitation (REHAB) SERVICE SUPPORT
	216204ᵠ		TELEPHONE SPEECH REHAB SUPPORT
218		2611.00	CAT BLIND REHAB. Computer Assisted Training (CAT) provides specialized services to eligible blinded veterans through comprehensive adaptive computer needs assessment, prescription, training and issuance of equipment. These veterans for are not able to attend the inpatient program, thus this training is provided in their home environment.
333		2110.00	CARDIAC CATHETERIZATION (CATH). Records visit for Cardiac Catheterization and related studies in a Cardiac Catheterization Suite or Laboratory Unit. If Cardiac Catheterization is done in a Cardiac Catheterization Suite, DSS Identifier 333 used in the primary position is sufficient.
334		2110.00	CARDIAC STRESS TEST/Exercise Tolerance Test (ETT). Records patient visit for cardiac stress tests (either ETT or drug-induced and other related tests in a cardiac exercise tolerance laboratory or unit). If ETT is done in a special exercise stress test laboratory, unit or suite, DSS Identifier 334 used in the primary position is sufficient. The Nuclear Medicine part of Cardiac Stress tests/ETT should be recorded with stop code 109. 334 schedules and reports the cardiology (Medicine Service) contribution only.

Table B   New Stop Codes Added (continued)

DSS ID NUMBER	DSS ID PAIR	CDR	DESCRIPTION
	510474		Psychology (PSO) RESEARCH. Records the individual patient visit for evaluation, follow-up, and/or treatment involved in a research protocol under the direction of Psychology Service
	527564$^{\psi}$		TELEPHONE-INTENSIVE COMMUNITY CASE MANAGEMENT (ICCM). Records patient consultation or psychiatric care, management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the ICCM program. Includes administrative and clinical services. <u>Not</u> to be used for telephone contacts with the New England Psychiatric Evaluation Center (NEPEC)-supported Intensive Psychiatric Community Care (IPCC) teams. **Provisions of Title 38 united States Code (U.S.C.) Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of Department of Veterans Affairs (VA) patients which relate to drug abuse, alcoholism or alcohol abuse, infection with human immunodeficiency virus or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.
564		2311.00	ICCM. Records visits with patients and/or families or caregivers by ICCM staff at all locations. Includes clinical and administrative services provided ICCM patients by ICCM staff. <u>Not</u> to be used for visits to NEPEC-supported IPCC teams.
589		2311.00	NON-ACTIVE DUTY SEX TRAUMA. Records patient visit for appropriate care and services to a veteran for a psychological injury, illness or other condition determined to be the result of a physical assault, battery, or harassment experienced during childhood; any pre-active and post-active duty status (<u>Not On Active Duty</u>). Services include clinical and administrative services. If Trauma occurred on Active Duty, use 524.
730		N/A	DOMICILIARY–GENERAL CARE. The use of this code is <u>optional</u> and should <u>only</u> be used for those facilities which desire to identify inpatient products via Event Capture. (Do <u>not</u> use for scheduling or cost purposes.)

b. **Table B   Inactivated Stop Codes**

DSS ID NUMBER	DSS ID PAIR	CDR	DESCRIPTION
731		N/A	Psychiatric Resident Rehab Treatment Program (PRRTP)-GENERAL CARE. The use of this code is optional and should only be used for those facilities which desire to identify residential care products via Event Capture. (Do not use for scheduling or cost purposes.)
501		N/A	HOMELESS MENTALLY ILL OUTREACH. Records any visit, relating to the care of a homeless chronically mentally ill patient, made to a community-based non-VA facility. May include physician services, psychology services, social services, nursing services and administrative services.
	303329	N/A	CARDIAC CATH. For outpatient Cardiac Cath in a Non-Operating Room (OR) setting. *(See new stop code 333)*
	417473	N/A	ORTHOTIC Laboratory (LAB)
	417474	N/A	PROSTHETICS LAB
	510475	N/A	Research (RSCH)
	574513	2314.00	Compensated Work Therapy (CWT)/SUBSTANCE ABUSE
900		N/A	SPECIAL SERVICES

ATTACHMENT D

EXISTING PRIMARY STOP CODE DEFINITION CHANGES (TABLE C)

Table C   Existing PRIMARY Stop Code Definition Changes

DSS ID NUMBER	CDR	DESCRIPTION
121	N/A	**Residential Care (Non-Mental Health (MH)).** Records visit by Department of Veterans Affairs (VA) personnel to a patient at a residential home care. (Visits of patients in the residential home care program to a VA medical facility are to be recorded to the designated specialty clinic stop.) (If Residential Care is related to MH, use 503.)
123	2610.00	**Nutrition-Dietetics-Individual.** Records patient encounter for the purpose of receiving education, information, and/or counseling concerning nutrition and/or dietary matters (including weight control). Use when services are provided to an individual patient.
124	2610.00	**Nutrition-Dietetics-Group.** Records the encounter of a group of patients for the purpose of receiving education, information, and/or counseling concerning nutrition and/or dietary matters (including weight control). Use when services are provided to more than one patient in the same session.
178+$^{\psi}$	2780.00	**Home-based Primary Care (HBPC) – Telephone.** Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical/ professional staff assigned to HBPC service. Includes administrative and clinical services. **Provisions of Title 38 United States Code (U.S.C.) Section 7332 which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, infection with human immunodeficiency virus (HIV), or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
180	2710.00	**Dental.** Records outpatient visit of patient for treatment/examination relating to dental conditions and accomplished by a dentist and/or dental technician. Includes technician services, dentist services, and administrative services.
209	2611.00	**Visual Impairment Services Team (VIST) Coordinator**. Records outpatient visit to the VIST Coordinator to furnish care to the visually impaired veteran. Includes coordinator services and administrative services. In the absence of a VIST Coordinator and when the VIST Coordinators are performed by another caregiver as collateral duties, i.e., Social Worker; it is appropriate to use the 209 in the primary position and 125 in the credit stop position VIST Telephone visits should be used: 209-125.

** Amended use of a DSS Identifier

Table C   Existing PRIMARY Stop Code Definition Changes (cont.)

DSS ID NUMBER	CDR	DESCRIPTION
290	2110.00	**Observation Medicine.** Records outpatient visit for observation provided by a physician assigned to general medical service. Must use Health Care Finance Administration (HCFA), Medicare, or current procedural terminology (CPT) code definition of observation. Not to be used for assigning a patient to a bed for Medicine Service Ambulatory Procedures. Includes physician service, ancillary staff and administrative services.
291	2210.00	**Observation Surgery.** Records outpatient visit for Observation provided by a physician assigned to surgery service. Must use HCFA, Medicare, or CPT code definition of observation. Not to be used for assigning a patient to a bed for Surgery Service Ambulatory Procedures Includes physician service, ancillary staff and administrative services.
293	2110.00	**Observation Neurology.** Records outpatient visit for observation provided by a physician assigned to neurology service. Must use HCFA, Medicare, CPT code definition of observation. Not to be used for assigning a patient to a bed for Neurology Service Ambulatory Procedures Includes physician service, ancillary staff, and administrative services.
304	2110.00	**Dermatology.** Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in skin diseases. Includes physician services, ancillary staff services, and administrative services.
305	2110.00	**Endocrinology and/or Metabology (ENDO/METAB) (Except Diabetes).** Records consultation, evaluation, follow-up and/or treatment provided by a physician trained in endocrinology and/or metabology. Includes physician services, ancillary staff services and administrative services.
313	2110.00	**Renal and/or Nephrology (RENAL/NEPHROL) (Except Dialysis).** Records consultation, evaluation, follow-up, and/or treatment provided by physician trained in diseases of the kidney. Includes physician services, ancillary staff services and administrative services.
321	2110.00	**Gastrointestinal (GI) Endoscopy.** Records patient visit for performance or examination of part(s) of the gastroenterologic tract and related structures using special instruments by physician or consultants. Examinations may include but not be limited to: esophasoscopy, gastroscopy, duodenoscopy, colonoscopy and sigmoidoscopy. Includes physician, nurse, technician and administrative services. Decision Support System (DSS) Identifier 321 used in the primary position is sufficient if Endoscopy procedure is done in the outpatient endoscopy suite. It may also be used as a credit pair if endoscopy is not done in the endoscopy suite.

Table C   Existing PRIMARY Stop Code Definition Changes (cont.)

DSS ID NUMBER	CDR	DESCRIPTION
327	2211.00	**MED MD PERFORM INVASIVE OR PROC.** - Records the same day operating room preparation, services, and post-operative recovery room care. All operating room care for outpatients should be designated by a DSS Identifier with 327 in the primary position; the medical code related to the medical specialty can be used in the secondary DSS Identifier position as a modifier, if the VA medical center selects to do so.
329	2110.00	**Medical Procedure Unit.** Records invasive medical procedures done in a non-operating room setting. Use only when a more definitive code is not available (321-endoscopy, 330-Chemotherapy, 333- Cardiac Catheterization, 334-Exercie Tolerance Test (ETT). Do not use if procedure is done in the Operating Room (OR) (327). Includes physician and other ancillary staff 's time. If procedures are done in a unit or suite, DSS Identifier 329 used in the primary position is sufficient. It is also appropriate to use this code as a credit pair if site wishes to document non-OR invasive medical procedures done in other areas. For example:
	304329	Dermatology Biopsies
	307329	Liver Biopsies
	316329	Oncology and/or tumor procedures
332	2110.00	**Pre-Bed Care Registered Nurse (RN) (Medical Service).** Nurse evaluation and care support of patients intended to be admitted to Medical Service in the hospital in the near future. Medical Service physician oversight. <u>Do Not use for Observation Care</u> (for outpatient Observation, see stops 290-296).
423+	2614.00	**Prosthetic Supply Ordering Service.** Records patient visit for consultation, evaluation, education, information, and/or counseling concerning eligibility for prosthetic services, appliances, and devices, and benefit claims, and prescription processing. Includes prosthetic representative and administrative services. Includes dispensing of Prosthetic Supplies to patients as available.
435	2210	**Surgical Procedure Unit.** Records invasive surgical procedures done in a non-operating room setting. Use only when a more definitive code is not available (430- Cysto, 431-Chemotherapy). Do not use if procedure is done in the OR (429). Includes physician and other ancillary staff 's time. If procedures are done in a unit or suite, DSS Identifier 435 used in the primary position is sufficient. It is also appropriate to use this code as a credit pair if site wishes to document invasive surgical procedures done in other areas.

Table C   Existing PRIMARY Stop Code Definition Changes (cont.)

DSS ID NUMBER	CDR	DESCRIPTION
503	N/A	**MH Residential Care Individual.** Records visits to a patient residing in: a community nursing home, a boarding home, a community home, etc. Includes physician, nursing, social work, and administrative services. (If not residential care related to MH, use 121)
505	2311.00	**Day Treatment Individual.** Records individual patient visit for ongoing treatment and rehabilitation services of patients with mental health and psychogeriatric disorders who require clinical assistance and support up to 4 to 8 hours per day, 3 to 7 days per week for <u>continuing care and community maintenance</u>. Day treatment clinics serve patients who are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting. Includes clinical and administrative services.
506	2311.00	**Day Hospital Individual.** Records individual patient visits for evaluation, treatment, and/or rehabilitation of patients with mental health disorders, that require intensive diagnostic and treatment services up to 4 to 8 hours per day, 3 to 7 days per week. Is typically prioritized along the lines of <u>crisis treatment, transitional care, and rehabilitation</u> as opposed to continuing care and community maintenance. Day hospital clinics serve patients who are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services
509	2311.00	**Psychiatry MD Individual.** Records individual patient visit for the purpose of evaluation, follow-up, and/or treatment provided by a physician trained in mental, emotional and behavioral disorders. May prescribe medications. Includes physician and administrative services.
520	2311.00	**Long-term Enhancement Individual.** For use by <u>approved</u> long-term psychiatric care hospitals. Provides Individual outpatient support for maintenance in the community of chronic mentally ill veterans with a history of institutional dependence.
524$^{\psi}$	2311.00	**Active Duty Sex Trauma.** Records patient visit for appropriate care and services to a veteran for a psychological injury, illness or other condition determined to be the result of a physical assault, battery, or harassment of a sexual nature, while serving on active military duty. Services include clinical and administrative services. (reference Public Law (Pub. L.) 102-585)

Table C   Existing PRIMARY Stop Code Definition Changes (cont.)

DSS ID NUMBER	CDR	DESCRIPTION
531	2331.00	**MH Primary Care Team Individual.** Records individual care provided to patients assigned to a Mental Health Primary Care Team, characterized by a coordinated interdisciplinary approach consisting of: (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity of care; and, (f) patient and non-professional care giver education and training. Includes clinical, ancillary and administrative services.
532	2315.00	**Psychosocial Rehabilitation Individual.** Records individual services provided to aid veteran's successful community re-entry, i.e., case management, advocacy, counseling, social and living skills development, interviews, etc. (For use by Psychosocial Rehabilitation Programs and other programs where more specific DSS Identifiers do not exist).
550	2310.00	**Mental Health Clinic (Group).** Records services assigned to a group of outpatients by any clinical specialty assigned to the MH Clinic.
552	5117.00	**Intensive Psychiatric Community Care (IPCC) Community Visit.** Only VA medical centers approved to participate in the IPCC Program may use this code. This records visits with patients and/ or their families or caregivers by IPCC staff at all locations not on the VA medical center grounds, at a VA outpatient or at IPCC satellite clinics, IPCC storefronts or IPCC offices. Includes clinical and administrative services provided IPCC patients by IPCC staff. Additional stop codes may not be taken for the same workload.
553	2310.00	**Day Treatment Group.** Records treatment to a group of patients with mental health and psychogeriatric disorder, for ongoing and rehabilitation services. Patients require clinical assistance and support up to 4 to 8 hours per day, 3 to 7 days per week for continuing care and community maintenance. Day treatment clinics serve patients who are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting. Includes clinical and administrative services.

Table C Existing PRIMARY Stop Code Definition Changes (cont.)

DSS ID NUMBER	CDR	DESCRIPTION
553	2310.00	**Day Treatment Group.** Records treatment to a group of patients with mental health and psychogeriatric disorder, for ongoing and rehabilitation services. Patients require clinical assistance and support up to 4 to 8 hours per day, 3 to 7 days per week for <u>continuing care and community maintenance</u>. Day treatment clinics serve patients who are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting. Includes clinical and administrative services.
554	2310.00	**Day Hospital Group.** Records treatment to a group of patients for evaluation, treatment, and/or rehabilitation of patients with mental health disorders, who require intensive diagnostic and treatment services up to 4 to 8 hours per day, 3 to 7 days per week. Day hospital clinics are typically prioritized along the lines <u>of crisis treatment, transitional care, and rehabilitation</u> as opposed to continuing care and community maintenance. Patients are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services
563	2330.00	**MH Primary Care Team Group.** Records care provided to a group of patients assigned to a MH Primary Care Team characterized by a coordinated interdisciplinary approach consisting of; (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity of care; and (f) patient and non-professional care giver education and training. Includes clinical and administrative services.
574	2314.00	**MH Compensated Work Therapy (CWT) Group.** Records patient visit for evaluation for, or work activity in, the CWT-Veterans Industries Program provided by Psychology, Psychiatry, Social Work, Domiciliary or other service other than Physical Medicine and Rehabilitation Service. Involves work subcontracted from and paid for by public and/or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the Special Therapeutic and Rehabilitation Activities Fund (STRAF) account at the VA facility.

ATTACHMENT E

EXISTING SECONDARY STOP CODE DEFINITION CHANGES (TABLE D)

Table D – Existing SECONDARY Stop Code Definition Changes

Secondary DSS ID	CDR	DESCRIPTION
580	2310.00	**Post Traumatic Stress Disorder (PTSD) Day Hospital.** Records psychiatric treatment to an individual or group of patients diagnosed with post traumatic stress disorders, who require <u>intensive diagnostic and treatment services</u> up to 4 to 8 hours per day, 3 to 7 days per week. PTSD day hospital clinics typically are prioritized along the lines of crisis treatment, transitional care, and rehabilitation as opposed to continuing care and community maintenance. Patients are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services
581	2310.00	**PTSD Day Treatment.** Records therapeutic psychiatric outpatient services to an individual or a group of patients diagnosed with post traumatic stress disorders, who require clinical assistance and support up to 4 to 8 hours per day, 3 to 7 days per week for <u>continuing care and community maintenance</u>. Patients in day treatment are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting.
	415461	Aneurysm Detection And Management (ADAM) Clinic
480		**Comprehensive Fundoscopy Exam.** This Decision Support System (DSS) identifier may only be used in the credit position. It is primarily to be used with identifiers 301, 305, 306, 309, 323, 350, 407 and 408 whenever a comprehensive fundoscopic examination is performed, i.e., for patients with diabetes or hypertension; however, it may be used in conjunction with any other DSS identifier should the need arise.
481+		**Bronchoscopy.** This DSS Identifier may only be used in the credit position. It is used for the unit which provides bronchoscopy. It should be used in conjunction with any DSS identifier, for example:
	429481	If Outpatient Bronchoscopy is done by Surgery in the Operating Room (OR)
	312481	If Outpatient Bronchoscopy is done in the Pulmonary Area
	327481	If Outpatient Bronchoscopy is done by Medicine in the OR
	329481	If Outpatient Bronchoscopy is done in the Medical Procedure Unit
	435481	If Outpatient Bronchoscopy is done in "Lumps and Bumps" Surgery Procedure Unit
	510474	Psychology Research

+ Changed DSS Identifier description

Secondary DSS ID	CDR	DESCRIPTION
	708+	**Nutrition.** Records outpatient visit for the purpose of consultation and/or education in dietary and nutritional health (including weight control). Includes clinical and administrative services.
710	N/A*	**Influenza Immunization.** Records outpatient visit for the purpose of influenza immunization injection. Includes clinical and administrative services. Is not restricted to veterans.

REMINDER: Secondary Code use Only: of the following stops:
101 – Emergency Unit 450 through 485 – Locally Defined 701 through 711

* Not applicable to Cost Distribution Report (CDR), Automated Medical Information System (AMIS) segment J-19 is used by CDR currently for workload
\+ Changed DSS ID description

ATTACHMENT F

STOP CODES 100 – 299 SERIES INCLUDING OBSERVATION (290-299)

1. **Occasion of Service Stop Codes Ancillary List**

   a. **Definition.** Occasions of services are interactions with technical staff not in a medical-decision making role.

   b. **Operationally.** These are stop codes which pass to the Austin Automation Center (AAC) without diagnostic coding because there is no prompt to answer International Classification of Diseases-9th Edition-Clinical Modification (ICD-9-CM) classification questions (i.e., provider name, procedure code and diagnosis code).

   c. **Occasions of Service (OOS).** The following stops are always Occasions of Service (OOS), i.e. are exempt from requiring an ICD-9-CM diagnostic code. Decision Support System (DSS) Identifiers from Radiology Packages, including Nuclear Medicine, and from the Laboratory Package are passed automatically when registrations and accessions of tests are made in their respective packages. Electrocardiogram (EKG) encounters must be entered through Patient Care Encounter (PCE), Ambulatory Information Capture System (AICS), Text Integration Utility (TIU), or Appointment Management.

   (1) 105 Radiology

   (2) 109 Nuclear Medicine

   (3) 108 Laboratory

   (4) 07 EKG

*NOTE: Other stop codes can be designated as OOS on the Health Administration Service (HAS) software. These include all the stop codes in the "exempt column on the Veterans Health Information Systems Technology Architecture (VISTA) in **Attachment K** unless paired with a non-exempt credit pair.*

2. **Telephone Stop Codes**. See stop code list Attachment L for all current stop codes indicating telephone care. When these stops are used, each Department of Veterans Affairs (VA) medical center may select one of the following three current procedural terminology (CPT) codes. Do not bill telephone.

   a. **99371**. Telephone call by a physician to patient or for consultation or medical management or for coordinating medical management with other health care professionals, (e.g., Nurses, therapists, social workers, nutritionists, physicians, pharmacists); simple or brief, (e.g., to report on tests and/or laboratory results, to clarify or alter previous instructions, to integrate new information from other health professionals into the medical treatment plan, or to adjust therapy).

b. **99372.** Intermediate (e.g., to provide advice to an established patient on a new problem, to initiate therapy that can be handled by telephone, to discuss test results in detail, to coordinate medical management of a new problem in an established patient, to discuss and evaluate new information and details, or to initiate new plan of care).

c. **99373.** Complex or lengthy (e.g., lengthy counseling session with anxious or distraught patient, detailed or prolonged discussion with family members regarding seriously ill patient, lengthy communication necessary to coordinate complex services of several different health professionals working on different aspects of the total patient care plan).

3. **Home Based Primary Care (HBPC)**

NOTE: The phrase HBPC has been updated from hospital-based home care (HBHC) to HBPC. Each VA medical center should ensure the name is changed (reference Veterans Health Administration (VHA) Dir. 96-051).

DSS ID NUMBER	CDR ACCT	DSS ID NAME	DESCRIPTION
170	N/A	**HBPC - PHYSICIAN**	**HBPC.** Records evaluations; treatment orders and follow-up for patients in HBPC, etc.
171	N/A	**HBPC –** Registered Nurse (RN), Registered Nurse Practitioner (RNP), Physician Assistant (PA)	**HBPC.** Records initial and continued assessment; teaching patient and caregiver; monitoring patient's condition, supervising Licensed Practical Nurse (LPN)s and Home Health Technician; functioning in expanded nursing role; providing care management and coordination of primary care.
172	N/A	**HBPC - NURSE EXTENDER**	**HBPC.** Records monitoring observation of physical, nutritional and psychological status; reinforcing rehabilitation measures; demonstrating and teaching use of therapeutic and rehabilitative devices; providing nursing procedures and personal care.
173	N/A	**HBPC - SOCIAL WORKER**	**HBPC.** Records initial and continued assessment of patient and caregiver of interpersonal resources, psychosocial functioning, support system; provides psychosocial treatment including individual and family counseling.

DSS ID NUMBER	CDR ACCT	DSS ID NAME	DESCRIPTION
174	N/A	**HBPC** - THERAPIST	**HBPC.** Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establishes therapeutic program to maintain function.
175	N/A	**HBPC** - DIETITIAN	**HBPC.** Records assessment of patient's nutritional status, assess adequacy of caregiver's capacity to prepare recommended meals; training of caregiver in efficient ways of managing identified nutritional problems.
176	N/A	**HBPC** - CLINICAL PHARMACIST	**HBPC.** Records assessment and monitoring of drug therapy; identifies patient - specific medication issues; educates patient and caregiver about proper use of medications.
177	N/A	**HBPC** - OTHER	**HBPC.** Records professional, home health aide and other services provided.
		HBPC-Physical Medicine and Rehabilitation Service (PMRS)	
		HBPC-Spinal Cord Injury (SCI)	
178	2780	**HBPC** - TELEPHONE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to HBPC service. Includes administrative and clinical services. **Provisions of Title 38 United states Code (U.S.C.) Section 7332 which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, infection with human immunodeficiency virus (HIV) virus, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.

** Amended use of a DSS ID

4. **Observation Reporting.** Observation reporting is a specially defined type of extended outpatient care (see 1999 Observation CPT code definition).

5. **Use Observation DSS ID Codes in the Outpatient Setting**

   a. **Observation Data Reporting**

   (1) Criteria. Observation cases must meet the criteria set up by Health Care Finance Administration (HCFA) (Medicare) and by the 1999 CPT code criteria.

   (2) Background

   (a) In Fiscal Year (FY) 97, it was shown through the results of the FY 97 National Stop Code Usage Survey that Observation cases were found to be reported in no consistent manner between sites, over a wide range of DSS Identifiers. In FY 97, these observation cases were reported both in the Medicine and Surgery series as well as in the Admit/Screening (102-101); Medical Surgical Day Unit (MSDU) (328); and Ambulatory Care work units. For FY 98, seven Observation stop codes were created, specifically for Observation-only work (290-296).

   (b) In FY 98 (since October 1, 1997), most VA medical centers have followed the Observation stop code guides in Directive 96-057, Change 3. This permits clear identification of all Observation work without negatively impacting the Cost Distribution Report (CDR), DSS, Performance Measures and Medical Care Cost Recovery (MCCR). However, about two years ago, to compensate for the VISTA Dietetics and Unit Dose drug packages, which did not serve outpatients at that time, (as a type "software workaround"), a proposed "Observation Directive" (VHA Directive 98-025) was developed for consideration. Due to concerns with that directive, it is currently under review and study. This inpatient Observation Directive guided VA medical centers to admit Observation patients to one of seven new Observation treating specialties on Patient Treatment File (PTF), thus requiring for each Observation stay, a discharge summary. Since this directive makes Revenue Modeling and coding of patients not possible on DSS or other revenue modeling systems, it is recommended that for FY 99, VA medical centers continue their FY 98 practice for Observation patients of using the seven observation stop codes; for FY 99, these DSS identifiers will continue to be available.

   (c) For use in FY 98 and thereafter, the National FY 98 Stop Code Sub-Task Force on Observation Care Reporting, developed the seven Observation Stop Codes (290 through 296) to uniformly report observation care by providing clinical service. These have been available and used by most VA medical centers for the entire FY 98. This is especially important for those VA medical centers who have major hardship using any PTF admissions for Observation Care.

   b. **Action.** As a major principle, all Observation Care that is to be designated by the VA medical center for outpatient stop code reporting should be reported only by one of the seven outpatient Observation stop codes, in the primary position, with the appropriate CPT and ICD-9-CM codes.

(1) The current HCFA and CPT code definitions of Observation care applies to the use of these seven new Observation stop codes and to the use of the standard Observation CPT codes. Credit pairs describing the work unit producing the observation work can be used.

(2) For Observation Care that meets HCFA and CPT code criteria, only seven Observation stop codes should be used:

290 – Observation Medicine
291 – Observation Surgery
292 – Observation Psychiatry
293 – Observation Neurology
294 – Observation Blind Rehab
295 – Observation Spinal Cord
296 – Observation Rehabilitation

NOTE: From FY 98 onward, no stop code should be used in the primary position for Observation Care other than one of these seven "Observation –Only" stop codes.

6. **New Stop Codes in FY 99 in the 100-299 Series**

   a. Respiratory Therapy – Stop Code 116

   b. Computer Assisted Training (CAT) Blind Rehabilitation – Stop Code 218

7. **Changed Definitions and Descriptions in FY 99** (See Att. J, Table F)

   123 -- Nutrition/Dietetics/Individual
   124 -- Nutrition/Dietetics/Group
   290 -- Observation Medicine
   291 -- Observation Surgery
   293 -- Observation Neurology

8. **Visual Impairment Service Team (VIST) Coordinator (209).** Definition Change to Stop Code 209 (see Table F).

   a. Capture of VIST stop code 209 – 125 collateral duties.

   b. Telephone capture of VIST duties: 147 – 209.

ATTACHMENT G

STOP CODES 300 SERIES
DEFINITIONS FOR PRIMARY CARE DATA REPORTING

1. **Definitions.** The term "Primary Care" has caused considerable confusion in the Department of Veterans Affairs (VA) in relation to stop codes and workload definitions. There are four operational meanings of Primary Care in the Veterans Health Administration (VHA) which represent very distinct functionalities.

   a. **Primary Care as a Service Line of the Medical Center.** Primary Care as a Service Line of the Medical Center, like the Medical-Surgical, Mental Health, and Extended Care (Long-term Care) Service Lines.

   b. **Primary Care as a Clinical Service Product (Intermediate Product).** Primary Care as a Clinical Service Product (Intermediate Product), i.e., a set of prevention or annual physical or other care products needing to be tracked by enrollee for performance measures.

   c. **Primary Care as a Form of Health Care Practice or Specialty.** Primary Care as a form of health care practice or specialty for mdical physicians (M.D.s), Physician Assistants (PAs) and Nurse Practitioners. In VHA outpatient areas, these workers are represented by stop code designated, DSS production units.

   d. **Primary Care as a Managed Care Version of Case Manager.** Primary Care as a managed care version of case manager (case management) where every Primary Care Patient is assigned to a Primary Care Team and a Primary Care Provider, i.e., a patient with a chronic heart disease is assigned to a cardiologist as "primary care physician" and that patient, from then on, becomes part of this specialist's primary care panel. It is critical to use the VHA's Veterans Health Information Systems Technology Architecture (VISTA) Primary Care Management Module (PCMM) package to keep track of VHA enrollees and/or physician. PCMM will be used to extract the population for the Primary Care Enrollment performance measure in Fiscal Year (FY) 99.

NOTE: Although Decision Support System (DSS) data can be used to gain information about all four of these Primary Care entities, DSS Identifiers (stop codes) are related only to subparagraphs 1b and 1c.

2. **Recommended Codes for Primary Care Reporting.** DSS Identifiers are used to <u>define work areas</u> or production units for clinicians who are specialized in the practice of Primary Care (e.g., DSS Identifiers 323 and 350), (see subpar 1c). <u>DSS Identifiers</u> are also used to describe the stable, cost products provided to patients, that constitute <u>primary care services</u> (see subpar. 1b).

a. **Primary DSS Identifiers for Primary Care**

(1) The VHA stop codes in the primary position that relate to primary care work (or production) units and primary care products are:

(a) 323 - Primary Care-Medicine

(b) 322 - Women's Clinic

(c) 350 - Primary Care-Geriatrics

(d) 531 - Mental Health Primary Care Team-Individual

(e) 563 - Mental Health Primary Care Team-Group

(f) 170177 - Home Based Primary Care (HBPC)

b. **Secondary DSS Identifiers for Primary Care.** For medical specialty clinics that also provide primary care products, 323 can be appended as a secondary code in the six character DSS Identifier to indicate the clinic in that specialty that provides specifically primary care services (e.g. 303-323 for cardiologist's clinic providing primary care.)

3. **Information on Selection of Performance Measure Subsets Using Primary and Secondary DSS Identifiers for Primary Care**

a. There are two databases being used to extract Primary Care Performance Measure data:

(1) The PCMM module mentioned for enrollment, (see VHA Dir. 98-023 for details); and

(2) DSS Identifiers in the National Patient Care Database (NPCD) related to Primary Care for sample selections for customer satisfaction, and for some other measurements.

b. The DSS Identifiers used in defining Performance Measure data sets should reflect where primary care products are provided. The primary care products are determined by using the Primary Care-defined DSS Identifiers (323, 322, 350, 531, 563). These codes may be in the primary or secondary position in the clinic setup.

c. If the set of products desired is only for _physician_ workload versus some other clinician, the secondary code should be reviewed. If a secondary code is present, other than a local stop, this indicates that a non-physician provided the primary care services. Another method to check for physician as provider, is to review the value for the "practitioner-type" reported on the local Patient Care Encounter (PCE), or on NPCD, for the encounter and to determine if that value is in the range of physician practitioners.

(1) Use of the secondary credit pair to designate primary care teams is preferred because it enables sites to set-up separate DSS departments for each primary care team more easily using FDR KEY (six character DSS Identifier).

(2) However, many sites prefer to use the alpha codes for the DSS designators for primary care teams' DSS intermediate products. The caveats here are:

(a) In setting up DSS feeder keys or products, be careful to do so by examination of the entire feeder key, specifically the last five characters.

(b) Be sure to use the DSS suffix as "ATEM, BTEM, etc. that have the alpha character that identifies the team in the first (not fourth) position. In DSS, sometimes the fourth position does not show up so clear identification of the teams product could be difficult if the alpha designator is not in the first position.

4. Guidelines for Primary Care Team Area Stop Code Use: Using DSS Identifiers for DSS Primary Care Departments and for DSS Intermediate Products

To designate a Primary Care team with DSS identifiers, two approaches are feasible:

a. Recommendations were made in DSS to code the Primary Care Teams using the credit pairs: local codes, such as, Special Registry 1 (461) or Special Registry 2 (469) to designate Team 1, Team 2, etc. or the blue team or the gold team, etc. See the following example:

Primary Code	Secondary Code	National Alpha Code	Description
323	461	NURS	Nurse run clinic for the Primary Care Team 1 or the blue team.
323	469	NURS	Nurse run clinic for the Primary Care Team 2 or the gold team.
323	461	SOCW	Social work run clinic for the Team 1 or the Primary Care blue team.
323	461	RESI	Resident run clinic for the Primary Care Team 1 or the blue team.

b. Historically, when DSS was implemented, a third identification code-(4 character Alpha code) was added to the primary and secondary stop codes. A national 4-character Alpha code list for use with the DSS stop code worksheet VISTA functionality was distributed with the DSS VISTA software and is updated occasionally (see current list in Att. O). This allowed an additional level on which to try to identify clinic work products for DSS costing. Thus alternatively, for DSS products only, a site can select to use the National Alpha codes, such as, ATEM or BTEM, to designate the primary teams. See following example:

Primary Code	Secondary Code	National Alpha Code	Description
323	117	ATEM	Nurse run clinic for the Primary Care blue team.
323		ATEM	Physician run clinic for the Primary Care blue team.
323	125	BTEM	Social work run clinic for the Primary Care gold team.
323	461	NURS	Nurse run clinic for the Primary Care Team 1 or the blue team.
323	469	NURS	Nurse run clinic for the Primary Care Team 2 or the gold team.
323	461	SOCW	Social work run clinic for the Team 1 or the Primary Care blue team.
323	461	RESI	Resident run clinic for the Primary Care Team 1 or the blue team.
323	461	NURS	Nurse run clinic for the Primary Care Team 1 or the blue team.
323	469	NURS	Nurse run clinic for the Primary Care Team 2 or the gold team.
323	461	SOCW	Social work run clinic for the Team 1 or the Primary Care blue team.
323	461	RESI	Resident run clinic for the Primary Care Team 1 or the blue team.

c. Historically, when DSS was implemented, a third identification code-(4 character Alpha code) was added to the primary and secondary stop codes. A national 4-character Alpha code list for use with the DSS stop code worksheet VISTA functionality was distributed with the DSS VISTA software and is updated occasionally (see current list in Att. O). This allowed an additional level on which to try to identify clinic work products for DSS costing. Alternatively, for DSS products only, a site can select to use the National Alpha codes, such as, ATEM or BTEM, to designate the primary teams; see the following example:

Primary Code	Secondary Code	National Alpha Code	Description
323	117	ATEM	Nurse run clinic for the Primary Care blue team.
323		ATEM	Physician run clinic for the Primary Care blue team.
323	125	BTEM	Social work run clinic for the Primary Care gold team.

d. Other primary care done in a specialty clinic would be designated with the 323 as a credit pair to the specialty clinic; see the following example:

Primary Code	Secondary Code	National Alpha Code	Description
303	323		Cardiologist run clinic providing primary care.

NOTE: This second option does <u>not</u> help the site determine primary care team work units by stop code at local VA medical center or on Austin Automation Center (AAC) Statistical Analysis System (SAS) Outpatient Clinic (OPC) file.

ATTACHMENT H

STOP CODE 400 SERIES - AMBULATORY SURGERY DATA REPORTING

1. **Ambulatory Surgery Data Reporting in Three Specific Components**

a. Fiscal Year (FY) 1999 National Decision Support System (DSS) Stop Code Use Survey. The FY 99 national DSS stop code use survey revealed a variety of DSS Identifier code usage in Ambulatory Surgery units. The following are some general guidelines. Specific code definitions can be found in Attachment J, Table F.

(1) The Ambulatory Surgery process can be composed of three steps (or those specific components): preparation for surgery, surgery, and post-operative care.

(2) The choice of which code to use will be determined by three factors:

(a) Whether the surgery is performed in an Operating Room (OR) or specialty procedure unit,

(b) What types of procedures are done, and

(c) What type of physician is performing the surgery.

NOTE: Using code 117 – Nursing is a local decision, but if it is used, it should be confined to a credit pair.

(2) **Preparation for Surgery**

(a) A good choice of codes to document pre-operative work would be the codes **416** – Ambulatory Surgery Evaluation by Non-M.D. and/or **419** – Anesthesia Pre-Operation and/or Post- Operation Consultation (Pre-OP/Post-OP Consult). These codes can be adapted to be used the same day of surgery or days in advance.

(b) The following codes should only be used for pre-operative work done prior to a <u>hospital admission</u>, not for outpatient Ambulatory Surgery. The codes are; **331**- Pre-Bed Care M.D. (Medical Service), **332**- Pre-Bed Care R.N. (Medical Service), **432**- Pre-Bed Care M.D. (Surgical Service) And **433** – Pre-Bed Care R.N. (Surgery).

(2) **Operation Room**

(a) Code **429** – Outpatient Care in the Operating Room - should be used for the majority of procedures done by surgeons in an operating room.

(b) Code **327** – Medicine Physician Performing Invasive OR Procedure is - also available to record procedures if done by a Medicine physician as the primary operator in an operating room. *NOTE: Both these codes include room preparation, operating room services and post-operative recovery room time. Either can be set up as separate locations to be used for automatic data*

transfer from the Surgery package, and the code (429 or 327) should be in the primary stop code position.

(3) **Other (Non-OR) Invasive Procedure Units.** There are several codes available to define specific (Non-OR) invasive procedure units. If procedures are done in a unit or suite, these codes should be in the primary stop code position.

(a) Codes include: **321**- GI Endoscopy, **330** – Chemotherapy Procedures Unit (Medicine), **333** – Cardiac Catheterization, **334**- Cardiac Stress Test/Exercise Tolerance Test (ETT), **329** – Medical Procedure Unit, **430** – Cysto Room Unit For Outpatient, **431** – Chemotherapy Procedures Unit (Surgery), **435** – Surgical Procedure Unit. *NOTE: It is also appropriate to use these codes as a secondary stop code if site wishes to document invasive procedures done in other areas. This may be necessary if the site does not have specialty units established, and performs procedures in regular clinic areas.*

(b) Codes **480** – Fundoscopy and **481** – Bronchoscopy are <u>only</u> to be used in the secondary position.

(4) **Post-Operative Care**

(a) Two codes which are available for specific post-operative care are: Code **419** – Anesthesia Pre-OP/Post-OP Consult and Code **328** – Medical and/or Surgical Day Unit (MSDU). These codes are used for Anesthesia Follow-up (419) and for some post-operative nurse care if the patient followed in the Medical Surgical Day Unit (328).

(b) Codes **429** – Outpatient Care in the OR, and **327** – Medicine M.D. Performing Invasive OR Procedure - do include recovery room time and, therefore, may not need an additional clinic visit.

(5) **Unscheduled Procedures**

(a) VHA has a national outpatient database for which the DSS Identifier known as Primary and Secondary Stop Code Pair performs a service identifying the type of clinical work department providing care. For this reason, sites are encouraged to use these codes not only for scheduled procedures, but also for unscheduled procedures. Clinics should be available to record procedures performed in suites or units as well as other clinic areas where invasive procedures are performed.

(b) If an unscheduled procedure becomes necessary during a regular clinic visit, the Unscheduled Visit feature of the Scheduling package should be used to record a visit in such a clinic. *NOTE: This only applies if the procedure does not pass to Patient Care Encounter (PCE) by a link established in the <u>non-OR</u> component of the Surgery package.* Documenting procedures in this way will give DSS unique products and give a fuller picture for standardization purposes. *NOTE: The workload may also be reflected on the site's Cost Distribution Report. These benefits cannot be achieved through Current Procedural Terminology (CPT) coding alone.*

(6) **Examples of Non-OR Coding Possibilities**

NON-OR PROCEDURES	DSS ID	DESCRIPTION
BRONCHOSCOPY	312481	Bronchoscopy done in Pulmonary clinic
BRONCHOSCOPY	329481	Bronchoscopy done in medical procedure unit
DERM BIOPSIES	304329	Biopsies done in Dermatology clinic
FUNDOSCOPY	306480	Fundoscopy exam done in Diabetes Clinic
FUNDOSCOPY	407480	Fundoscopy exam done in Ophthalmology Clinic
GI ENDOSCOPY	307321	Endoscopy done in Gastroenterology clinic
GI ENDOSCOPY	321	Endoscopy done in Endoscopy suite
LIVER BIOPSIES	307329	Biopsies done in a Gastroenterology clinic
LIVER BIOPSIES	435307	Biopsies done in Non-OR suite by Surgery
RENAL BIOPSIES	313329	Biopsies done in a Renal Clinic

2. **General and Sub-Specialty Surgical DSS Identifiers**

   a. **General Surgery**

      401 – General Surgery

   b. **Sub-Specialty Identifiers**

      402 – Cardiac Surgery
      403 – Ear, Nose, and Throat (ENT)
      404 – Gynecology
      405 – Hand Surgery
      406 – Neurosurgery
      407 – Ophthalmology
      408 – Optometry
      409 – Orthopedics
      410 – Plastic Surgery
      411 – Podiatry
      412 – Proctology
      413 – Thoracic Surgery
      414 – Urology
      415 – Vascular Surgery
      417 – Prosthetic, Orthotics: Evaluation, Fitting, and/or Measuring
      423 – Prosthetic Supply Ordering

3. **Ambulatory Surgery Identifiers**

   a. **Pre-Op**

      416 – Ambulatory Surgery Evaluation by other than M.D.
      419 – Anesthesia Pre-op/Post-op Consult

   b. **Operation**

      429 – Ambulatory Surgery Operating Room or Regular Operating Room
      430 – Cysto Room for Outpatients

   c. **Other Non-OR Invasive**

      431 – Chemotherapy Procedures Unit
      435 – Surgical Procedure Unit

   d. **Pre-Hospital Admissions Work**

      432 – Pre-bed Care by Surgical Physician
      433 – Pre-bed Care by Nurse

4. **Surgical Clinic, Laboratory, and Special Exam Identifiers**

      418 – Amputation Clinic
      420 – Pain Clinic
      421 – Vascular Laboratory
      422 – Cast Clinic
      424 – Telephone Clinic and/or Surgery
      425 – Telephone Clinic and/or Prosthetics-Orthotics
      426 – Women's Surgical Clinic
      428 – Telephone Clinic and/or Optometry
      480 – Comprehensive Fundoscopy Exam

5. **Mandatory Identifier Pairs**

      410-210 – Spinal Cord injury (SCI) Plastic Surgery
      414-451 – Impotency Clinic
      414-473 – Urodynamics Clinic
      415-461 – Aneurysm Detection and Management (ADAM) Clinic
      417-201 – Major Medical and/or Prosthetics-Orthotics
      417-451 – Wheelchair
      417-452 – Cushion
      417-455 – Shoe and/or Brace
      417-473 – Orthotic Lab
      423-461 – Cad Cam Unit

423-473 – Prosthetic Laboratory

* -450 – Compensation and Pension (C&P) Exams (* represents the service or sub specialty clinic doing the exam, i.e., 315-450 for Neurology C&P or 401 and/or 450 for General Surgery C&P)

* -481 – Bronchoscopy
       321481 If outpatient Bronchoscopy done in Endoscopy Room
       327481 If outpatient Bronchoscopy done in the OR by Medicine
       329481 If outpatient Bronchoscopy done in the Ambulatory Procedures Unit
       429481 If outpatient Bronchoscopy done by Surgery in the OR
       438481 If outpatient Bronchoscopy done in "Lumps and Bumps" Surgery Procedure Unit

ATTACHMENT I

MENTAL HEALTH AND OTHER 500-999 SERIES

1. **Changes in Mental Health Codes Fiscal Year (FY) 99**

   a. **New Primary Decision Support System (DSS) Identifiers**

DSS ID NUMBER	CDR ACCT	DSS ID NAME	DESCRIPTION
564	2311.00	INTENSIVE COMMUNITY CASE MANAGEMENT (ICCM)	Records visits with patients and/or families or caregivers by ICCM staff at all locations. Includes clinical and administrative services provided ICCM patients by ICCM staff. Not to be used for visits to New England Psychiatric Evaluation Center (NEPEC)-supported Intensive Psychiatric Community Care (IPCC) teams.
589	2311.00	NON-ACTIVE DUTY SEX TRAUMA	Records patient visit for appropriate care and services to a veteran for a psychological injury, illness or other condition determined to be the result of a physical assault, battery, or harassment experienced during childhood; any pre- active and post-active duty status (not on active duty). Services include clinical and administrative services (see Public Law (Pub. L.) 102-585) If Trauma occurred on Active Duty, use 524.
730	N/A	DOMICILIARY-GENERAL CARE	The use of this code is optional and should only be used for those facilities who desire to identify inpatient products via Patient Event Capture (PEC). (Do not use for scheduling or cost purposes.)
731	N/A	Psychiatric Resident Rehabilitation Treatment Program (PRRTP)-GENERAL CARE	The use of this code is optional and should only be used for those facilities who desire to identify residential care products via PEC. (Do not use for scheduling or cost purposes.)

b. **New DSS Identifier Credit Pairs**

DSS ID* NUMBER	CDR ACCT	DSS ID* NAME	DESCRIPTION
527564		TELEPHONE – ICCM	Records patient consultation or psychiatric care, management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the ICCM program. Includes administrative and clinical services. <u>Not</u> to be used for telephone contacts with NEPEC-supported IPCC teams. **Provisions of Title 38 United States Code (U.S.C.) Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of Department of Veterans Affairs (VA) patients which relate to drug abuse, alcoholism or alcohol abuse, infection with human immunodeficiency virus (HIV) or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.
510474		Psychology (PSO) RESEARCH	Records the individual patient visit for evaluation, follow-up, and/or treatment involved in a research protocol under the direction of Psychology Service

c. **Definition Changes**

(1) Definition changes have occurred in the following primary stop codes: 121; 503; 505; 506; 509; 520; 524; 531; 532; 550; 552; 553; 554; 563; 574; 580; 581 (see Att. J, Table F).

(2) Definition changes have occurred in the following credit pairs: 510473, 516726

d. **Inactive Codes**

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
501 - Inactivated 10/1/94		N/A	HOMELESS MENTALLY ILL (HMI) OUTREACH	Records any visit, relating to the care of a homeless chronically mentally ill patient, made to a community-based non-VA facility. May include physician services, psychology services, social services, nursing services and administrative services.

* Not applicable to Cost Distribution Report (CDR), Automated Medical Information System (AMIS) segment J-19 is used by CDR currently for workload
** Amended use of a DSS Identifier

e. **Inactive Codes**

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	510475 -		RESEARCH	Use 510-474
	574513	2314.00	CWT/ SUBSTANCE ABUSE	Records Compensated Work Therapy (CWT) patient visits by outpatients who are in a <u>Substance Abuse Program</u> that was enhanced to support CWT. Included here are evaluations for, work activity in, the CWT/Veterans Industries Program provided by Psychology, Psychiatry, Social Work, Domiciliary or other service other than Physical Medicine & Rehabilitation Service (PM&RS). Involves work subcontracted from and paid for by public and/or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the special therapeutic and productive capabilities, from the Special Therapeutic and Rehabilitation Activities Fund (STRAF) account at the VA facility.
	999510		PSO-EAP	Optional

2. <u>Distinctions between Care in the Mental Health Day Hospital and in the Mental Health Day Treatment Center</u>

a. The VA has two programs intended to provide special support to mental health patients to avoid hospitalization.

(1) **Day Hospital.** Day Hospital is a specific acute episode program that is intended to help prevent repeat hospitalizations due to exacerbating mental illness. If a patient has been stable on the outside, but suddenly becomes hallucinatory and uncontrolled on current medications, that patient may be referred to the Day Hospital. It is meant to be used to prevent hospitalization in acute crisis or exacerbations only. Usually patients are not assigned to Mental Health Day Hospital for more than 3-week episodes.

* Not applicable to Cost Distribution Report (CDR), Automated Medical Information System (AMIS) segment J-19 is used by CDR currently for workload

(2) **Day Treatment**. Day Treatment is chronic Mental Health caregiving for outpatients. This is intended to be used for long-term conditions needing support to maintain care or well-being on the outpatient side only.

b. In FY 99, the hours and days for the two programs Day Hospital and Day Treatment were changed to match and to more realistically reflect programs 4 to 8 hours per day, 3 to 7 days per week.

(a) Purpose. The major distinction is that Day Treatment is long-term for continuing care and community maintenance. Day Hospital clinics are prioritized for crisis treatment, transitional care and rehabilitation.

(b) Duration. Duration of episode of treatment typically on average, do not extend beyond 3 to 4 weeks per client per acute episode in a Day Hospital Clinic, unlike Day Treatment care which is expected to go on for months or years.

3. Sexual Trauma Counseling

a. **Stop Code 524 – ACTIVE DUTY SEX TRAUMA COUNSELING.** Stop Code 524 is to be used when providing counseling to any veteran who received this type of trauma while on active military duty. These patients may or may not have had sexual trauma as children or before and/or after active duty. If any sexual trauma occurred during active military duty, this DSS Identifier (524) should be used.

b. **Stop Code 589 – NON-ACTIVE DUTY SEX TRAUMA COUNSELING.** Stop Code 589 should be used for patients who have received sexual trauma at some time, but not during active military duty. If it occurred during active military duty, stop code 524 must be used (see Pub. L. 102-585).

4. Categorization of all Mental Health and Domiciliary (DOM) Stop Codes

a. **Psychiatry (M.D.)**

509 Psychiatry MD (Individual)
512 Psychiatry Consultation
557 Psychiatry Group

b. **Mental Health**

502 Mental Health Clinic (Individual)
550 Mental Health Clinic (Group)
535 Mental Health Vocational Assistance (Individual)
573 Mental Health Incentive Therapy (Group)
574 Mental Health Compensated Work Therapy (CWT) (Group)
575 Mental Health Vocational Assistance (Group)

c. **Psychology**

510 Psychology (Individual)
510473 Neurospsychology Lab
510474 Psychology Research
510509 Psychology – Psychiatry (PSO-PSI)
558 Psychology (Group)

d. **Special Programs**

529 Health Care for Homeless veterans (HCHV)/HMI
522 Department of Housing and Urban Development (HUD) – VA Shared Housing (VASH)
523 Opioid Substitute
540 Post Traumatic Stress Disorder (PTSD) PTSD Clinical Team (PCT) –PTSD (Individual)
561 PCT-PTSD (Group)
577 Psychogeriatric Clinic (Group)
576 Psychogeriatric Clinic (Individual)
559 Psychosocial Rehabilitation (Group)
532 Psychosocial Rehabilitation (Individual)
562 PTSD (Group)
516 PTSD (Individual)
516-726 PTSD DOM Aftercare (Group)
524 Active Duty Sexual Trauma
560 Substance Abuse (Group)
513 Substance Abuse (Individual)
513461 Substance Abuse: Alcohol Dependence (Individual)
513469 Substance Abuse: Drug Dependence (Individual)
560461 Substance Abuse: Alcohol Dependence (Group)
560469 Substance Abuse: Drug Dependence (Group)
519 Substance Use Disorder/PTSD Teams
525 Women's Stress Disorder Treatment Teams
589 Non-Active Duty Sexual Trauma

e. **Telephone**

527 Telephone General Psychiatry
527564 Telephone ICCM
528 Telephone Homeless Mentally Ill
530 Telephone HUD-VASH
536 Telephone Mental Health Vocational
537 Telephone Psychosocial Rehabilitation
542 Telephone PTSD
545 Telephone Substance Abuse
545461 Telephone Substance Abuse Treatment-Alcohol Dependence
545469 Telephone Substance Abuse Treatment-Drug Dependence
546 Telephone IPCC
579 Telephone Psychogeriatrics

f. **Off Station**

503 Mental Health Residential Care (Individual)
514 Substance Abuse Home Visit
520 Long-term Enhancement
521 Long-term Enhancement (Group)
552 IPCC Community Visit
564 Intensive Community Case Management (ICCM)
590 Community Outreach to Homeless Vets by Staff other than HCHV and Domiciliary Care for Homeless Veterans (DCHV) programs

g. **Day Programs**

505 Day Treatment (Individual)
506 Day Hospital (Individual)
547 Intensive Substance Abuse Treatment
547461 Intensive Substance Abuse Treatment-Alcohol Dependence
547469 Intensive Substance Abuse Treatment-Drug Dependence
553 Day Treatment (Group)
554 Day Hospital (Group)
578 Psychogeriatric Day Program
580 PTSD Day Hospital
581 PTSD Day Treatment

h. **Primary Care**

531 Mental Health Primary Care Team (Individual)
563 Mental Health Primary Care Team (Group)

i. **Other**

725 DOM Outreach
726 DOM Aftercare Community
727 DOM Aftercare VA
728 DOM Admission Screening Services
729 Telephone Domiciliary
730 Domiciliary-General Care
731 PRRTP-General Care

ATTACHMENT J

COMPLETE SUMMARY OF OCTOBER 1, 1998 ACTIVE STOP CODES

a. The complete changes and updates and current status of October 1, 1998, Decision Support System (DSS) Identifiers, their short and long definitions, follows in **Table F**.

b. The following symbols are used throughout Table F:

*   Not applicable to Cost Distribution Report (CDR), Automated Medical Information System (AMIS) segment J-19 is used by CDR currently for workload
**   Amended use of a DSS Identifier
\+   Changed DSS Identifier description
++   New DSS Identifier
‡   Added or changed DSS Identifier Cost Distribution Report account
\-   Inactivated DSS ID
ψ   Work from these stop codes is always <u>Non-Billable</u> in Medical Care Cost Recovery (MCCR)

TABLE F, Fiscal Year (FY) 99 Outpatient DSS Identifier Definitions (Effective on Veterans Health Information Systems Technology Architecture (VISTA) Software October 1, 1997)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
	101** (Secondary Stop Code only, effective 10/1/97)	2111.00	EMERGENCY UNIT	Includes all activities involved in the evaluation and screening of patients in an emergency and/or stretcher room. This includes administrative, physician, nursing, and ancillary services. Use as a secondary stop only effective October 1, 1997.
102		2111.00	ADMITTING/ SCREENING	Includes all clinical activities involved in the evaluation, screening and treatment of patients in an emergency, urgent care, triage, stretcher room. Also includes activities involved in the admitting and/or screening process of patients applying for medical care. Includes administrative, physician, nursing, technician services. To be used in first (stop code) position in profile setup.

TABLE F, Fiscal Year (FY) 99 Outpatient DSS Identifier Definitions (Effective on Veterans Health Information Systems Technology Architecture (VISTA) Software October 1, 1997)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
103$^{\psi}$		2780.00	TELEPHONE TRIAGE	Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and professional staff assigned to the admission and/or emergency services area. Includes administrative and clinical services. **Provisions of Title 38 United States Code (U.S.C.) Section 7332 requires that records which reveal. the identity, diagnosis, prognosis, or treatment of Department of Veterans Affairs (VA) patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with human immunodeficiency virus (HIV), or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
104		2612.00	PULMONARY FUNCTION	Records patient visit for the performance of a diagnostic pulmonary function study and/or treatment. Includes the services of a therapist and/or a technician, physician services and interpretation, and administrative services.
105		2612.00	X-RAY	Records patient visit for the performance of diagnostic, routine radiograms; e.g., chest, ankle, spine, tibia, elbow, etc. Includes technician services, physician services and interpretation, and administrative services.
106		2612.00	EEG	Records patient visit for the performance of an electroencephalogram (EEG). Includes technician services, physician services and interpretation, and administrative services.
107		2612.00	EKG	Records patient visit for the performance of an electrocardiogram (EKG). Includes technician services, physician services and interpretation, and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software October 1, 1997)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
	107473		ECHO	Indicates patient visits for the performance of an ECHO cardiac study. Includes technician services, physician services and interpretation, and administrative services.
108		2612.00	LABORATORY	Records patient visit for the performance of diagnostic testing; e.g., blood serum, urine, sputum, tissue, etc. Includes technologist services, physician services and interpretation, and administrative services. Includes chemistry, cytology, microbiology, pathology, etc.
109		2612.00	NUCLEAR MEDICINE	Records patient visit for the performance of nuclear diagnostic procedures. Procedures include bone scan, liver scan, thyroid scan, brain scan, etc. Includes technician services, physician services and interpretation, and administrative services.
115		2612.00	ULTRASOUND	Records patient visit for the performance of ultrasonic diagnostic procedures (sonograms). Includes technician services, services and interpretation, and administrative services.
116++		2110.00	RESPIRATORY THERAPY	Records patient visit for Respiratory Therapy services, including treatment and/or education in use of treatment modalities. (Use code 312 for other pulmonary care.)
117		2610.00	NURSING	Includes assessment, evaluation, education, treatment services provided by Registered Nurse (R.N.) or Advanced Nurse Practitioner (ANP) in Nurse Administered clinics. Can be used as first (stop code) or secondary (credit stop) position in clinic setup. Should be second stop code in all Nurse-run work units for team work such as Primary Care (323) and Mental Health (502).
	117473		PPD CLINIC	Tuberculosis Purified Protein Derivative (PPD) Shot Clinic

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software October 1, 1997)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
	117710		FLUSHOT	Flu Shot Clinic
118		N/A*	HOME TREATMENT SERVICES	Records individual visit by VA personnel to the home of a patient for providing care and/or service. Use only when a more definitive stop code is not available.
119		N/A*	COMMUNITY NURSING HOME FOLLOW-UP	Records individual visit by VA personnel to patients residing in a community nursing home.
120		2610.00	HEALTH SCREENING	Records patient medical evaluation and/or screening performed at a location other than a VA medical facility.
121+		N/A*	RESIDENTIAL CARE (NON-MH)	Records visit by VA personnel to a patient at a residential home care. (Visits of patients in the residential home care program to a VA medical facility are to be recorded to the designated specialty clinic stop.) (If Residential Care is related to Mental Health, use 503.)
122		2610.00	PUBLIC HEALTH NURSING	Records individual patient visit with a licensed R.N. that assess, treats, and/or evaluates the patient in the home due to physical limitations preventing travel of veteran to a VA facility.
123+		2610.00	NUTRITION/ DIETETICS/ INDIVIDUAL	Records patient encounter for the purpose of receiving education, information, and/or counseling concerning nutrition and/or dietary matters (including weight control). Use when services are provided to an individual patient.
124+		2610.00	NUTRITION/ DIETETICS/ GROUP	Records the encounter of a group of patients for the purpose of receiving education, information, and/or counseling concerning nutrition and/or dietary matters (including weight control). Use when services are provided to more than one patient in the same session.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software October 1, 1997)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
125		2610.00	SOCIAL WORK SERVICE	Records individual patient visit with a social worker when the visit is not accomplished as a portion of another specialty clinic.
126		2612.00	EVOKED POTENTIAL	An activity that involves the measurement of specific brain electrical responses to discrete sensory stimuli. The evoking stimulus can be VEP (visual), AEP (auditory), or stimulus can be VEP SSEP (somatosensory). Includes physician services, nursing services, technician services, and administrative services.
127		2612.00	TOPOGRAPHICAL BRAIN MAPPING	Records visits of patients receiving a technician services, and computerized EEG and brain imaging technique which results in graphic presentation of the data in two-dimensional, color-coded maps of brain electrical activity. Includes physician services, nursing services, technician services, and administrative services.
128		2612.00	PROLONGED VIDEO-EEG MONITORING	Records visits of patients who receive EEG while at the same time being video recorded. Includes physician services, nursing services, technician services, and administrative services.
144		2612.00	RADIONUCLIDE THERAPY	Records patient visit or therapy with unsealed radioactive isotopes and/or radionuclides. Includes technician, physician services and interpretation, safety and administrative services.
145		2612.00	PHARMACOLOGY/ PHYSIOLOGIC NUCLEAR MYOCARDIAL PERFUSION STUDIES	Records patient visit for nuclear cardiac perfusion studies. Includes EKG technician, physician services and interpretation and administrative services.
146		2612.00	PET	Records patient visit for all activities where a cyclotron or generator is employed for the creation of physiologic and/or biochemical premised diagnostic images Includes the generation of the appropriate radionuclide. Includes technician, physician, and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
147$^{\psi}$		2780.00	TELEPHONE/ ANCILLARY	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or profession staff assigned to: Nursing, Public Health Nursing, Nutrition and/or Dietetics, Social Work Service, or Clinical Pharmacy. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with human immunodeficiency virus (HIV), or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.
	147209++$^{\psi}$		VIST TELEPHONE	
148$^{\psi}$		2780.00	TELEPHONE/ DIAGNOSTIC	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and a clinical or professional staff associated with: pulmonary function, x-ray, EEG, EKG, laboratory, nuclear, medicine, ultrasound, evoked potential, topographical brain mapping. Includes administrative services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
149		2420.00	RADIATION THERAPY TREATMENT	Records an individual veteran's visit for radiation therapy treatment. Includes technologist services, physicist services, physician services and/or consults, and administrative services. (Consider a treatment to be the same as a patient visit.)
150		2612.00	COMPUTERIZED TOMOGRAPHY (CT)	Records a patient visit for the performance of diagnostic CT exam. Includes technologist services, physician services and interpretation, and administrative services.
151		2612.00	MAGNETIC RESONANCE IMAGING (MRI)	Records a patient visit for the performance of diagnostic MRI exams. Includes technologist services, physician services and interpretation, and administrative services.
152		2612.00	ANGIOGRAM CATHETERIZATION	Records a patient visit for the performance of diagnostic angiographic exams by Catheterization. Includes technologist services, physician, services and interpretations, nursing, radiologist and/or administrative services.
153		2612.00	INTERVENTIONAL RADIOGRAPHY	Records a patient visit in Radiology for the performance of an interventional radiological procedure. Includes all technologist services, physician services and interpretation, and administrative services.
160		2610.00	CLINICAL PHARMACY	Patient visit with a pharmacist for specialized education, instruction, and/or counseling regarding prescribed medications. Do Not Use For Dispensing Medication From Pharmacy.
165		2610.00	BEREAVEMENT COUNSELING	Records counseling provided to family members and/or friends of deceased patients. (Visits should be reflected as collateral visits).
166		2610.00	CHAPLAIN SERVICE - INDIVIDUAL	Records outpatient visit for individual receiving consultation, spiritual care, treatment, assessment, education, and/or counseling provided by a clinical chaplain. Includes clinical chaplain services and administrative services.
167		2610.00	CHAPLAIN SERVICE - GROUP	Records spiritual care, treatment, assessment, education, and/or counseling provided to more than one individual by a clinical chaplain. Includes clinical chaplain services and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
168		2610.00	CHAPLAIN SERVICE - COLLATERAL	Records consultation, spiritual care, treatment, education, and/or counseling provided by a clinical chaplain to the patient's family members and/or the person(s) with whom the patient has a meaningful relationship. Includes clinical chaplain services and administrative services.
169$^{\psi}$		2780.00	TELEPHONE/ CHAPLAIN	Records patient consultation or medical care management, advice and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical or professional staff assigned to chaplain service. Includes clinical, professional, and administrative services. **Provisions of 38 U.S.C. Section 7332 requires the records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is written consent from the individual.
170+		N/A*	HBPC - PHYSICIAN	Home Based Primary Care (HBPC). Records evaluations; treatment orders and follow-up for patients in HBPC, etc.
171+		N/A*	HBPC – Registered Nurse (RN)/Registered Nurse Practitioner (RNP)/Physician Assistant (PA)	HBPC. Records initial and continued assessment; teaching patient and caregiver; monitoring patient's condition, supervising Licensed Practical Nurse (LPN)s and Home Health Technician; functioning in expanded nursing role; providing care management and coordination of primary care.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
172+		N/A*	HBPC - NURSE EXTENDER	HBPC. Records monitoring observation of physical, nutritional and psychological status; reinforcing rehabilitation measures; demonstrating and teaching use of therapeutic and rehabilitative devices; providing nursing procedures and personal care.
173+		N/A*	HBPC - SOCIAL WORKER	HBPC. Records initial and continued assessment of patient and caregiver of interpersonal resources, psychosocial functioning, support system; provides psychosocial treatment including individual and family counseling.
174+		N/A*	HBPC - THERAPIST	HBPC. Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establish therapeutic program to maintain function.
175+		N/A*	HBPC - DIETITIAN	HBPC. Records assessment of patient's nutritional status, assess adequacy of caregiver's capacity to prepare recommended meals; training of caregiver in efficient ways of managing identified nutritional problems.
176+		N/A*	HBPC - CLINICAL PHARMACIST	HBPC. Records assessment and monitoring of drug therapy; identifies patient - specific medication issues; educates patient and caregiver about proper use of medications.
177+		N/A*	HBPC - OTHER	HBPC. Records professional, home health aide and other services provided.
	177201+		HBPC-Physical Medicine and Rehabilitation Service (PM&RS)	
	177210+		HBPC-Spinal Cord Injury (SCI)	

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
178+$^\psi$		2780.00	HBPC/TELEPHONE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical or professional staff assigned to HBPC service. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
180+		2710.00	DENTAL	Records outpatient visit of patient for treatment and/or examination relating to dental conditions and accomplished by a dentist and/or dental technician. Includes technician services, dentist services, and administrative services.
181$^\psi$		2780.00	TELEPHONE/ DENTAL	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the persons(s) with whom the patient has a meaningful relationship and clinical or professional staff assigned to Dental Service. Includes administrative and professional services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
190		2510.00	ADULT DAY HEALTH CARE	Records visits of patients to an approved VA program. Purpose of visit is to provide care and/or treatment during day hours only, patient returns home each evening.
201		2611.00	PM&RS	Records patient outpatient visit to PM&RS for consultation and/or evaluation. Includes physician services, technician services, and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
202		2611.00	RECREATION THERAPY SERVICE	Records patient visit for consultation and/or /evaluation concerning potential benefits of recreational therapy and/or actual participation by an outpatient in a structured, supervised recreational activity. Includes therapist services and administrative services.
203		2611.00	AUDIOLOGY	Records outpatient visit for the purpose of consultation and/or evaluation of patients with hearing impairment. Includes audiologist services, technician services, and administrative services.
204		2611.00	SPEECH PATHOLOGY	Records outpatient visit for the purpose of consultation, evaluation, and/or treatment of patients with speech impediments. Includes pathologist services, therapist and/or technician services, and administrative services.
205		2611.00	PHYSICAL THERAPY	Records outpatient visit for the purpose of receiving treatment from a physical therapist. Includes the therapist services and Administrative services.
206		2611.00	OCCUPATIONAL THERAPY	Records outpatient visit for the purpose of receiving treatment from a occupational therapist. Includes the therapist services and administrative services.
207		2611.00	PM&RS INCENTIVE THERAPY	Records patient visit for evaluation for, or work activity, in the PM&RS Incentive Therapy Program. The rehabilitation program provided under 38 U.S.C. 1718(a) which authorizes assignment of patients to various in house work situations. Pay scale is up to one half of minimum wage. This program is supported by medical care funds.
208		2611.00	PM&RS COMPENSATED WORK THERAPY (CWT)	Records patient visit for evaluation for, or work activity, in the Physical Medicine and Rehabilitation CWT Program. Involves work subcontracted from and paid for by public or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the Special Fund (STRAF) account at the VA facility.
	208466$^{\psi}$		Domiciliary (DOM) CWT	

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software October 1, 1997)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
209+		2611.00	VIST COORDINATOR	Records outpatient visit to the Visual Impairment Services Team (VIST) Coordinator to furnish care to the visually impaired veteran. Includes coordinator services and administrative services. In the absence of a VIST Coordinator and when the VIST Coordinators are Performed by another caregiver as collateral duties, i.e., Social Worker; it is appropriate to use the 209 in the primary position and 125 in the credit stop position VIST Telephone visits should be used as indicated:
	209125++			VIST Coordinator duties performed by Social Worker
210		2611.00	SPINAL CORD INJURY (SCI)	Records patient outpatient visit for evaluation and/or follow-up of a SCI condition or disease. Includes physician services, technician services, and administrative services.
	210414		SCI-CYSTOURO	
	210468		SCI-RN PROCEDURE	
211		2611.00	AMPUTATION FOLLOW-UP CLINIC	Records outpatient visit for evaluation and/or treatment following removal of a limb or other appendage. Includes physician services, nursing services, and administrative services.
212		2611.00	Electromyogram (EMG)	Records visit for the performance of a diagnostic EMG. (Records the electrical activity evoked in a muscle by nerve stimulation.) Includes technician services, physician interpretation, and administrative services.
213		2611.00	PM&RS VOCATIONAL ASSISTANCE	Records patient visit for vocational testing, assessment, guidance, counseling, or hands-on treatment provided by the PM&RS Vocational Rehabilitation Therapy staff. This is to include educational therapy and any other rehabilitation medicine vocational rehabilitation therapy not specifically described as PM&RS CWT.
	213466$^{\psi}$		VETS ED/TRNG DOM	

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
214		2611.00	KINESIOTHERAPY	Records patient visit for therapy to improve and/or adjust a condition. Includes therapist, physician and administrative services.
215		N/A*	SCI HOME CARE PROGRAM	Records visits by VA staff to a patient's home for evaluation and/or follow-up of a SCI condition or disease. Includes physician, nursing, social work, dietetics, rehabilitation, technician, and administrative services.
216$^\psi$		2780.00	TELEPHONE/REHAB & SUPPORT	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship and clinical and professional staff assigned to rehabilitation and support services. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
	216203++$^\psi$		TELEPHONE AUDIOLOGY REHAB SERVICE SUPPORT	
	216204++$^\psi$		TELEPHONE SPEECH REHAB SUPPORT	

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	216210$^{\psi}$		SCI TELEPONE SUPPORT	
217		2611.00	Blind Rehab Outpatient Specialist (BROS)	Records outpatient visit to a BROS (a Blind Rehabilitation Specialist, with multiple training), with blinded veterans either in their home environment or in the VA medical center Outpatient area for pre- or post- Blind Rehabilitation Center or for training vets unable to participate in inpatient programs.
218++		2611.00	CAT BLIND REHAB	Computer Assisted Training (CAT) provides specialized services to eligible blinded veterans through comprehensive adaptive computer needs assessment, prescription, training, and issuance of equipment. These veterans for various reasons are not able to attend the inpatient training program and this training is provided in their home environment.
290+		2110.00	OBSERVATION MEDICINE	Records outpatient visit for Observation provided by a physician assigned to general medical service. Must use Health Care Finance Administration (HCFA) or Medicare, or current procedural terminology (CPT) code definition of observation. Not to be used for assigning a patient to a bed for Medicine Service Ambulatory Procedures. Includes physician service, ancillary staff and administrative services.
291+		2210.00	OBSERVATION SURGERY	Records outpatient visit for Observation provided by a physician assigned to surgery service. Must use HCFA, Medicare, or CPT code definition of observation. Not to be used for assigning a patient to a bed for Surgery Service Ambulatory Procedures Includes physician service, ancillary staff and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
292		2311.00	OBSERVATION PSYCHIATRY	Records outpatient visit for Observation provided by a physician assigned to psychiatry service. Includes physician service, ancillary staff and administrative services.
293+		2110.00	OBSERVATION NEUROLOGY	Records outpatient visit for Observation provided by a physician assigned to neurology service. Must use HCFA, Medicare, or CPT code definition of observation. Not to be used for assigning a patient to a bed for Neurology Service Ambulatory Procedures. Includes physician service, ancillary staff and administrative services.
294		2611.00	OBSERVATION BLIND REHAB	Records outpatient visit specifically for Observation Care by a Blind Rehabilitation Specialist.
295		2611.00	OBSERVATION SPINAL CORD	Records outpatient visit for Observation provided by a physician assigned to a spinal cord service. Includes physician service, ancillary staff and administrative services.
296		2611.00	OBSERVATION REHABILITATION	Records outpatient visit for Observation provided by a physician assigned to rehabilitation service. Includes physician service, ancillary staff and administrative services.
301		2110.00	GENERAL INTERNAL MEDICINE	Records outpatient visit for evaluation, consultation, and/or follow-up or treatment provided by a physician assigned to general medicine service. Includes physician services, ancillary staff services and administrative services.
302		2110.00	ALLERGY IMMUNOLOGY	Records visit for consultation, evaluation, and/or follow-up or treatment provided by a physician trained in medical sub-specialty of allergy immunology. Includes physician services, ancillary staff services, and administrative services.
303		2110.00	CARDIOLOGY	Records visit for consultation, evaluation, follow-up, and/or treatment provided by a physician trained in diagnosis and treatment of heart disease. Includes physician services, ancillary staff services and administrative services.
	303201		CARD REHAB	

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	303329 – Inactivated 10/1/98		CARDIAC CATH	For outpatient Cardiac Catherization in a Non-operating room (OR) setting.
304+		2110.00	DERMATOLOGY	Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in skin disease. Includes physician services, ancillary staff services and administrative services.
	304416		DERM PHOTO RX	
305+		2110.00	ENDO./METAB (EXCEPT DIABETES)	Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in endocrinology or metabology. Includes physician services, ancillary staff services and administrative services.
306		2110.00	DIABETES	Records consultation, evaluation, follow-up, treatment provided for diabetes mellitus. Includes physician services, ancillary staff services, and administrative services.
	306117		DIAB DM ED	
307		2110.00	GASTRO-ENTEROLOGY	Records consultation, evaluation, follow-up, treatment provided by a physician trained in diseases and conditions of the gastrointestinal tract. Includes physician services, ancillary staff services and administrative services.
	307117		ENTEROSTOMAL CLINIC	
	307454		LIVER	
308		2110.00	HEMATOLOGY	Records consultation, evaluation, follow-up, treatment provided by physician trained in blood related conditions. Includes physician services, ancillary staff services and administrative services.
309		2110.00	HYPERTENSION:	Records consultation, evaluation, follow-up, treatment of high blood pressure. Includes physician services, ancillary staff services and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
310		2110.00	INFECTIOUS DISEASE	Records consultation, evaluation, follow-up, treatment by physician trained in infectious disease. Includes physician services, ancillary staff services and administrative services.
311		2110.00	PACEMAKER	Records consultation, treatment, evaluation, follow-up for cardiac conditions which benefit from implant stimulation.
312		2110.00	PULMONARY/CHEST	Records consultation, evaluation, follow-up, treatment provided by a physician trained in diseases of the lungs and respiratory tract. Includes physician services, ancillary staff services and administrative services.
313+		2110.00	RENAL/NEPHROL (EXCEPT DIALYSIS)	Records consultation, evaluation, follow-up, and/or treatment provided by physician trained in diseases of the kidney. Includes physician services, ancillary staff services and administrative services.
	313457		TRANSPLANT	
314		2110.00	RHEUMATOLOGY/ ARTHRITIS	Records consultation, evaluation, follow-up, treatment provided by a physician trained in diseases joint and connective tissue (muscle and joints). Includes the physician services, ancillary staff services and administrative services.
315		2110.00	NEUROLOGY	Records consultation, evaluation, follow-up provided by a physician trained in the treatment of disorders of the nervous system. Includes the physician services and administrative services.
	315456		EPILEPSY	
	315469		MOVEMENT DISORDER	
	315470		SLEEP DISORDER	
316		2110.00	ONCOLOGY/TUMOR	Records consultation, evaluation, follow-up, and/or treatment provided by a physician knowledgeable in the treatment of tumors and malignancies. Includes physician services, ancillary staff services and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	316149		RAD RX (WITH ONCOLOGY MEDICINE SERVICE)	
317		2110.00	COUMADIN CLINIC	Records evaluation, follow-up, treatment provided to veterans receiving coumadin. Includes physician services, nursing services, pharmacy and administrative services.
318		2110.00	GERIATRIC CLINIC	Consultation, evaluation, follow-up and/or treatment provided by a physician trained in clinical problems associated with aging. Includes physician services and administrative services. This clinic includes specialty (i.e., Falls Clinic, etc.) services for elderly patients but does not function as a GEM clinic.
319		2110.00	GERIATRIC EVALUATION AND MANAGEMENT (GEM) CLINIC	Records patient visit for comprehensive, multi-dimensional evaluation, management and follow-up treatment of selected elderly patients provided by an interdisciplinary team, including physician, nurse and social worker at a minimum, who are trained in assessment and management of the functional, medical and psychosocial problems of the elderly. The GEM clinic provides follow-up of patients discharged from the GEM unit (if available at facility) as well as admits new patients for outpatient evaluation of frail elderly patients. Includes physician, nurse, social work and administrative services.
320		2110.00	ALZHEIMER'S/ DEMENTIA CLINIC	Records patient visit for evaluation, management, and follow-up treatment of patients with Alzheimer's disease (AD) or related dementias provided by physician and other appropriate health team members trained in the diagnostic aspects of AD and other dementias and the special care needs of the patient and family caregivers. Includes physician, nurse, social work, psychology and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
321+		2110.00	Gastrointestinal (GI) ENDOSCOPY	Records patient visit for performance or examination of part(s) of the gastroenterologic tract and related structures using special instruments by physician or consultants. Examinations may include but not be limited to esophasoscopy, gastroscopy, duodenoscopy, colonoscopy and sigmoidoscopy. Includes physician, nurse, technician and administrative services. DSS Identifier 321 used in the primary position is sufficient if Endoscopy procedure is done in the outpatient endoscopy suite. It may also be used as a credit pair if endoscopy is not done in the endoscopy suite.
322		2110.00	WOMEN'S CLINIC	Records patient visit to a formal, regularly scheduled women's clinic which provides gender specific and preventive services as well as counseling to women. Includes nurse, nurse practitioner, physician and clinicians providing counseling. (Staff may include gynecologist or facility may have a separate gynecology clinic or refer gynecology to outside practitioners).
323		2130.00	PRIMARY CARE/ MEDICINE	Includes patient encounter with inter-disciplinary team, or health care clinician who is accountable for addressing the majority of health care needs and developing a sustained partnership with patients on their team.
324$^\psi$		2780.00	TELEPHONE/ MEDICINE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical/professional staff assigned to the medicine service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
325$^{\psi}$		2780.00	TELEPHONE/ NEUROLOGY	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical or professional staff assigned to Neurology. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual
326$^{\psi}$		2780.00	TELEPHONE/ GERIATRICS	Records patient consultation or medical case management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical or professional staff assigned to the Geriatrics Service. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
327+		2211.00	MED MD PERFORM INVASIVE OR PROC	Records the same day operating room preparation, services, and post- operative recovery room care. All operating room care for outpatients should be designated by a DSS Identifier with 327 in the primary position; the medical code related to the medical specialty can be used in the secondary DSS Identifier position as a modifier, if the VA medical center selects to do so.
328		2110.00	MEDICAL/ SURGICAL DAY UNIT (MSDU)	Staffed by nurses paid by Medical, Surgical or Nursing Service to support outpatient medical or surgical patients receiving intensive care or post-op Day Unit care. Some outpatient surgery patients use the recovery room only. If so, stop code 429 includes the services. Do Not use for Observation Care (for outpatient Observation, see Stops 290-296; reference Observation Care, Att. F, par. 5).

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
329+		2110.00	MEDICAL PROCEDURE UNIT	Records invasive medical procedures done in a non-operating room setting. Use only when a more definitive code is not available (321-Endoscopy, 330-Chemotherapy, 333-Cardiac Catheterization, 334-Exercise Tolerance Test (ETT)). Do not use if procedure is done in Operating Room (327). Includes physician and other ancillary staff's time. If procedures are done in a unit or suite, DSS Identifier 329 used in the primary position is sufficient. It is also appropriate to use this code as a credit pair if site wishes to document non-OR invasive medical procedures done in other areas. For example:
	304329 307329 116329			Dermatology Biopsies Liver Biopsies Respiratory Therapy procedures
	316329			Oncology and/or tumor procedures
331		2110.00	PRE-BED CARE M.D. (MEDICAL SERVICE)	Medical Service physician evaluation and care of patients intended to be admitted to the hospital in the near future. Do Not use for Observation Care (for outpatient Observation, see Stops 290-296).
332+		2110.00	PRE-BED CARE RN (MEDICAL SERVICE)	Nurse evaluation and care support of patients intended to be admitted to Medical Service in the hospital in the near future. Medical Service physician oversight. Do Not use for Observation Care (for outpatient Observation, see Stops 290-296).
333++		2110.00	CARDIAC CATHETERIZATION	Records visit for Cardiac Catheterization and related studies in a Cardiac Catheterization Suite or Laboratory Unit. If Cardiac Catheterization is done in a Cardiac Catheterization Suite, DSS Identifier 333 used in the primary position is sufficient.
334++		2110	CARDIAC STRESS TEST/ETT	ETT. Records patient visit for cardiac stress tests (either ETT or drug-induced and other related tests in a cardiac exercise tolerance laboratory,or unit). If ETT is done in a special exercise stress test laboratory, unit, or suite, DSS Identifier 334 used in the primary position is sufficient. The Nuclear Medicine part of Cardiac Stress tests (ETT) should be recorded with stop code 109. 334 schedules and reports the cardiology (Medicine Service) contribution only.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
350		2110.00	GERIATRIC PRIMARY CARE	Records Primary Care provided to Geriatric patients through coordinated, interdisciplinary provision of medical, nursing, psychosocial services, ongoing and preventive health care services, health education to patients and caregivers, referral for specialty, rehabilitation and other levels of care, follow-up and overall care management by primary care provider and support team.
401		2210.00	GENERAL SURGERY	Records consultation, evaluation, follow-up, treatment provided by a physician trained in general surgical diseases and procedures. Includes physician and administrative services.
402		2210.00	CARDIAC SURGERY	Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in diseases and surgical procedures relating to the heart. Includes physician services and administrative services.
403		2210.00	ENT	Ear, nose, and throat (ENT) Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in diseases and surgical procedures relating to the ear, nose, and throat. Includes physician services and administrative services.
404		2210.00	GYNECOLOGY	Consultation, evaluation, follow-up, treatment provided by a physician trained in the diseases and surgical procedures of the female genital tract. Includes physician services and administrative services.
405		2210.00	HAND SURGERY	Consultation, evaluation, follow-up, provided by a physician trained in surgical hand and bone disorders. Includes physician and/or technician services and administrative services.
406		2210.00	NEUROSURGERY	Consultation, evaluation, follow-up, treatment provided by a physician trained in the diseases and surgical procedures relating to the central and peripheral nervous system. Includes physician services and administrative services.
407		2210.00	OPHTHALMOLOGY	Consultation, evaluation, follow-up, treatment provided by a physician trained in diseases and surgical procedures of the eye. Includes physician services and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
408		2210.00	OPTOMETRY	Examination, diagnosis and treatment of the eyes for ocular and vision defects. Physician trained in diseases of the eyes. Includes physician services and administrative services.
409		2210.00	ORTHOPEDICS	Consultation, evaluation, follow-up, treatment by a physician trained in diseases and surgical procedures relating to the muscular and skeletal system. Includes physician services and administrative services.
410		2210.00	PLASTIC SURGERY	Consultation, evaluation, follow-up and/or treatment by a physician trained in techniques of reconstructive surgeries. Includes physician services and administrative services.
	410210		SCI PLASTIC	
411		2210.00	PODIATRY	Consultation, evaluation, follow-up, treatment by a physician trained in disorders of the feet. Includes physician services and administrative services.
412		2210.00	PROCTOLOGY	Consultation, evaluation, follow-up, treatment provided by a physician trained in diseases and surgical procedures relating to the rectum. Includes physician services and administrative services.
413		2210.00	THORACIC SURGERY	Consultation, evaluation, follow-up, treatment provided by a physician trained in surgical procedures relating to the chest. Includes physician services and administrative services.
414		2210.00	UROLOGY	Consultation, evaluation, follow-up, treatment provided by a physician trained in disorders and surgical procedures relating to the urinary tract, both male and female, and male genital organs. Includes physicians' services and administrative services.
	414451		IMPOTENCY	
	414473		URODYNAMICS	

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
415		2210.00	VASCULAR SURGERY	Consultation, evaluation, follow-up, treatment provided by a physician trained in disease and surgical procedures of vascular system. Includes physician services and administrative services.
	415461+		ADAM CLINIC	Aneurysm Detection and Management (ADAM)
416		2210.00	AMBULATORY SURGERY EVALUATION BY NON-MD	Ambulatory Surgery Care: Records the care, testing and/or education in preparing any patient for a future scheduled ambulatory surgical procedure or on the same day as surgery includes administrative, nursing and ancillary services. (Pre-op Anesthesia Care should be included under Code 419).
417		2614.00	PROSTHETIC, ORTHOTICS	Consultation and/or evaluation, follow-up, and treatment provided by prosthetic, orthotic personnel for the purpose of a measurement, fitting, adjustment, instruction of a prosthetic, orthotic appliance intended to replace, support, substitute for a deformed, weakened, missing anatomical portion of the body. Includes physician services, orthotist, prosthetist services, therapist services and administrative services.
	417201		MAJOR MED DEVICES PROSTHETICS	
	417451		WHEEL CHAIR	
	417452		CUSHION	
	417455		SHOE/BRACE	
	417473 - inactivate 10/1/98		ORTHOTIC LAB	
	417474 - inactivate 10/1/98		PROSTHETIC LAB	

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
418		2614.00	AMPUTATION CLINIC	Consultation, evaluation, follow-up, treatment provided following surgical removal of, or loss of, a limb, extremity (all or partial). Includes the physician services, prosthetist services, and administrative services.
419		2210.00	ANESTHESIA PRE-OP/POST-OP CONSULT	Consultation provided to outpatient in preparation for surgical procedures. Or immediately after an operation. Should not be used for non-operation related work. Includes services of anesthesiologist and administrative services.
420		2210.00	PAIN CLINIC	Consultation, follow-up, treatment for management of pain. Physician assigned is determined at station level. Includes physician services, other clinicians, and administrative services.
421		2210.00	VASCULAR LABORATORY	Records patient visit for the performance of diagnostic blood vessel flow procedures (Dopplers, etc.) Includes physician services, interpretation, technician services and administrative services, under the direction of the Chief of Surgery.
422		2210.00	CAST CLINIC	Records visit for the purpose of application, measurement, adjustment, removal of plaster casts and splints. Clinic is normally staffed by a Orthopedic physician or technician. Includes physician and/or technician services and administrative services.
423+		2614.00	PROSTHETIC SUPPLY ORDERING SERVICE	Records patient visit for consultation, evaluation, education, information, and/or counseling concerning eligibility for prosthetic services, appliances, devices and benefit claims and prescription processing. Includes prosthetic representative and administrative services. Includes dispensing of Prosthetic Supplies to patients as available.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
424$^{\psi}$		2780.00	TELEPHONE/ SURGERY	Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and/or professional staff assigned to the surgical service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
425$^{\psi}$		2780.00	TELEPHONE/ PROSTHETICS/ ORTHOTICS	Records patient consultation or medical care management, advice and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to prosthetics or orthotics. Includes administrative and professional services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
426		2210.00	WOMEN SURGERY	Consultation/evaluation follow-up treatment relative to the diseases and surgical procedures of the female gender. Includes clinical and administrative services.
427 - (Inactivated 10/1/97)		2230.00	PRIMARY CARE/ SURGERY	Records patient care provided through a coordinated interdisciplinary approach consisting of: (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity; and (f) patient and non-professional care giver education and training. Includes clinical and administrative services.

TABLE F, FY99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
428$^\psi$		2780.00	TELEPHONE/ OPTOMETRY	Records patient consultation or medical care management, adviceand/or referral provided by telephone contact between patient or patient's next-of-kin and/or person(s) with whom the patient has a meaningful relationship and the clinical and/or professional staff assigned to optometry. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
429		2211.00	OUTPATIENT CARE IN THE OPERATING ROOM	Records the same day operating room preparation, operating room services, and post-operative recovery room care. All operating room care for outpatients should be designated by a DSS Identifier with stop code 429 in the primary position. This applies to all surgical clinics set up to automatedly receive data via the surgery VISTA package interface to PCE. The surgical stop code related to the surgical specialty can be used in the secondary DSS Identifier position as a modifier, if the VA medical center selects to do so.
430		2211.00	CYSTO ROOM UNIT FOR OUTPATIENT	Staffed by Surgical Service paid technician(s) or nurses, and a Surgical Service physician performs the procedure(s), in Cysto Room unit for outpatients.
431		2420.00	CHEMOTHERAPY PROCEDURES UNIT -SURGERY	A support unit staffed by nurses, technicians and/or others for the support of patients undergoing outpatient chemotherapy under the care of a Surgical Service physician.
432		2210.00	PRE-BED CARE M.D. (SURGICAL SERVICE)	Surgical Service physician evaluation and care of patients intended to be admitted to the hospital in the near future.
433		2210.00	PRE-BED CARE RN (SURGERY)	Nurse evaluation and care support of patients intended to be admitted to Surgery Service in the hospital in the near future. Surgical Service physician oversight.

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DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
435+		2210.00	SURGICAL PROCEDURE UNIT	Records invasive surgical procedures done in a non-operating room setting. Use only when a more definitive code is not available (430- Cysto, 431- Chemotherapy). Do not use if procedure is done in Operating Room (429). Includes physician and other ancillary staff 's time. If procedures are done in a unit or suite, DSS Identifier 435 used in the primary position is sufficient. It is also appropriate to use this code as a credit pair if site wishes to document invasive surgical procedures done in other areas.
	450 thru 485*	N/A*	*Use as credit pairs only. (See DSS Stop Code Book 1/97 for List A DSS Guides)	May use at discretion of facility without VA Central Office approval. Used only for tracking and counting of workload. They may not be assigned to a cost distribution account and do not impact on outpatient workload visits unless another designated or approved stop code is reported, as primary
	450		Compensation and Pension (C&P) EXAMS (available in FY 97)	
	451			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	452			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	453			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	454			SPECIAL REGISTRY 5
	455			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	456			SPECIAL REGISTRY 6
	457			TRANSPLANT
	458			SPECIAL REGISTRY 7
	459			SPECIAL REGISTRY 8
	460			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	461			SPECIAL REGISTRY 1
	462			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	463			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	464			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	465			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	466			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	467			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	468			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	469			SPECIAL REGISTRY 2
	470			SPECIAL REGISTRY 3
	471			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	472			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	473			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	474			RESEARCH
	475			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	476			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	477			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	478			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	479			SPECIAL REGISTRY 4
	480			COMPREHENSIVE FUNDOSCOPY EXAM - This DSS identifier may only be used in the credit position. It is primarily to be used with identifiers 301, 305, 306, 309, 323, 350, 407 and 408 whenever a comprehensive fundoscopic examination is performed, i.e., for patients with diabetes or hypertension; however, it may be used in conjunction with any other DSS identifier should the need arise.
	481+		BRONCHOSCOPY	If Bronchoscopy is done, 481 is to be used as the credit pair for the primary outpatient unit which performs the procedure – (CDR account used is the CDR account for the primary) for example:

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VistA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	321481			if Outpatient Bronchoscopy is done in the Endoscopy Room
	327481			if Outpatient Bronchoscopy is done in the OR by Medicine
	329481			if Outpatient Bronchoscopy is done in the Ambulatory Procedures Unit
	429481			if Outpatient Bronchoscopy is done by Surgery in the OR
	435481			if Outpatient Bronchoscopy is done in "Lumps and Bumps" Surgery Procedure Unit
	482			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	483			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	484			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	485			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
501 - Inactivated 10/1/94		N/A*	HOMELESS MENTALLY ILL OUTREACH	Records any visit, relating to the care of a homeless chronically mentally ill patient, made to a community-based non-VA facility. May include physician services, psychology services, social services, nursing services and administrative services.
502		2311.00	MENTAL HEALTH CLINIC INDIVIDUAL	Individual evaluation, consultation, and/or treatment by clinical staff trained in mental diseases and disorders. Includes clinical services and administrative services.
503+		N/A*	MENTAL HEALTH RESIDENTIAL CARE INDIVIDUAL	Records visits to a patient residing in: a community nursing home, a boarding home, a community home, etc. Includes physician, nursing, social work, and administrative services. (If not residential care related to Mental Health, use 121)

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
504 - Inactivated 4/1/97		5117.00	IPCC MEDICAL CENTER VISIT	Only VA medical centers approved to participate in the IPCC Program may use this code. This records visits of patients and/or their families or caregivers to IPCC staff on the VA medical center grounds or at a VA outpatient clinic. Includes clinical and administrative services provided IPCC patients by IPCC staff. Additional stop codes may not be taken for the same workload.
505+		2311.00	DAY TREATMENT-INDIVIDUAL	Records individual patient visit for ongoing treatment and rehabilitation services, of patients with mental health and psychogeriatric disorders, who require clinical assistance and support up to 4 to 8 hours per day, 3 to 7 days per week for <u>continuing</u> <u>care and community maintenance</u>. Day treatment clinics serve patients who are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting. Includes clinical and administrative services.
506+		2311.00	DAY HOSPITAL - INDIVIDUAL	Records individual patient visits for evaluation, treatment, and/or rehabilitation of patients with mental health disorders, that require intensive diagnostic and treatment services up to 4 to 8 hours per day, 3 to 7 days per week. Is typically prioritized along the lines of <u>crisis treatment, transitional care, and rehabilitation</u> as opposed to continuing care and community maintenance. Day hospital clinics serve patients who are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services
507 - Inactivated 4/1/97		2316.00	DRUG DEPENDENCE - INDIVIDUAL	Records patient visits for individual evaluation, consultation, follow-up, and treatment provided by a facility's formal Drug Dependence Treatment Program. Includes clinical and administrative services.
508 - Inactivated 4/1/97		2316.00	ALCOHOL TREATMENT - INDIVIDUAL	Records patient visits for individual evaluation, consultation, follow-up and treatment provided by a facility's formal Alcohol Dependence Treatment Program. Includes clinical and administrative services.
509+		2311.00	PSYCHIATRY – MD INDIVIDUAL	Records individual patient visit for the purpose of evaluation, follow-up, and treatment provided by a physician trained in mental, emotional and behavioral disorders. May prescribe medications. Includes <u>physician</u> and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
510		2311.00	PSYCHOLOGY - INDIVIDUAL	Records individual patient visit for the purpose of evaluation, follow-up, and treatment provided by a psychologist trained in mental, emotional and behavioral disorders. Includes clinical services and administrative services.
	510473+		NEURO PSYCHOLOGY LAB	Records the individual patient visit for the purpose of neuropsychological assessments performed by a specially trained psychologist in neuropsychological evaluations. Assessments usually are performed in a designated lab setting.
	510474++$^\psi$		PSO RESEARCH	Records the individual patient visit for evaluation, follow-up, and treatment involved in a research protocol under the direction of Psychology Service
	510475 – Inactivate 10/1/98		RESEARCH	Use 510-474
	510509		PSO-PSI	
512		2311.00	PSYCHIATRY CONSULTATION	Records patient consultation with a physician trained in mental, emotional and behavioral disorders. Includes physician and administrative services.
513		2316.00	SUBSTANCE ABUSE - INDIVIDUAL	Records patient visits for individual evaluation, consultation, follow-up, and treatment provided by a facility's formal Substance Abuse Treatment Program, including the Substance Abuse CWT/transitional Residence (TR) Program. Includes clinical and administrative services. If the program is exclusively for alcohol-dependent clients, use 513-461. If the program is exclusively for drug-dependent clients, use 513-469. If the program is for generic substance abuse (drug and alcohol), use 513 alone - without a secondary DSS Identifier.
	513461	2316.00	INDIVIDUAL SUBSTANCE ABUSE: ALCOHOL DEPENDENCE	Records patient visits for individual evaluation, consultation, and follow-up treatment provided by a facility's formal Substance Abuse Treatment Program, including the Substance Abuse CWT/TR Program. Includes clinical and administrative services. For a program exclusively treating alcohol-dependent clients.
	513469	2316.00	INDIVIDUAL SUBSTANCE ABUSE: DRUG DEPENDENCE	Records patient visits for individual evaluation, consultation, follow-up, and/or treatment provided by a facility's formal Substance Abuse Treatment Program, including the Substance Abuse CWT/TR Program. Includes clinical and administrative services: for clients with drug dependence. For a program exclusively treating drug-dependent clients.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
514		2316.00	SUBSTANCE ABUSE - HOME VISIT	Records visit by VA staff to patients with history of alcohol and drug abuse. The visit is accomplished in the patient's residence. Includes clinical services and administrative services.
515 - Inactivated 4/1/97		2311.00	CWT/TR-HCMI	CWT/TR visits by outpatients who are in CWT/TR programs which were funded by HCMI. These visits reflect the CWT work component as well as the independent living skills training and treatment of this comprehensive community re-entry program.
516		2310.00	PTSD - GROUP	Records consultation and/or treatment follow-up provided to more than one individual. Treatment is provided to those patients with PTSD. Includes clinical services and administrative services. This activity does not take place through a designated PCT.
	516726+		PTSD DOM-AFTERCARE-GROUP	Records consultation and treatment follow-up to more than one individual with a PTSD. Includes clinical and administrative services provided to discharged DOM patients by Psychiatry staff. This activity does not take place through a designated PCT.
517 - Inactivated 4/1/97		2316.00	CWT/ SUBSTANCE ABUSE	Compensated work therapy visits by outpatients who are in a substance abuse program which have been enhanced to support CWT.
518 - Inactivated 4/1/97		2316.00	CWT/TR - SUBSTANCE ABUSE	CWT/TR visits by outpatients who are in CWT/TR programs which were funded by substance abuse. These visits reflect the CWT work component as well as the independent living skills training and treatment of the comprehensive community re-entry program.
519		2317.00	SUBSTANCE USE DISORDER/PTSD TEAMS	Approved VA medical centers only. Records visit to a treatment team designed to treat substance use disorders (drug and alcohol) in conjunction with PTSD. Includes clinical services and administrative services.
520+		2311.00	LONG-TERM ENHANCEMENT - INDIVIDUAL	For use by approved long term psychiatric care hospitals. Provides Individual outpatient support for maintenance in the community of chronic mentally ill veterans with a history of institutional dependence.
521		2310.00	LONG-TERM ENHANCEMENT - GROUP	For use by approved long-term psychiatric care hospitals. Provides group outpatient support for chronic mentally ill patients to continue living in the community.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
522		2318.00	HUD-VASH	Records visits by staff of the HUD-VASH program for homeless veterans and families of these veterans. Workload should reflect activity related to permanent housing as well as caring for formerly homeless veterans in permanent housing. Includes physician services, psychology services, social services, nursing services, rehabilitation services and administrative services.
523		2316.00	OPIOID SUBSTITUTION	Outpatient treatment of opiate dependent clients by OPIOID substitution, including methadone maintenance, by the facility's formal substance abuse program. Includes clinical services and administrative services.
524+$^{\psi}$		2311.00	ACTIVE DUTY SEX TRAUMA	Records patient visit for appropriate care and services to a veteran for a psychological injury, illness or other condition determined to be the result of a physical assault, battery, or harassment of a sexual nature, while serving on active military duty. Services include clinical and administrative services. (Public Law 102-585)
525$^{\psi}$		2311.00	WOMEN'S STRESS DISORDER TREATMENT TEAMS	Records contacts with veterans seen by Women's Stress Disorder Treatment teams at officially VA Central Office designated VA medical centers.
526 - Inactivated 4/1/97		2780.00	TELEPHONE/ SPECIAL PSYCHIATRY	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the special psychiatry service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
527$^\psi$		2780.00	TELEPHONE/ GENERAL PSYCHIATRY	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the general psychiatry service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
	527564++$^\psi$		TELEPHONE – ICCM	Records patient consultation or psychiatric care, management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the ICCM program. Includes administrative and clinical services. NOT to be used for telephone contacts with the New England Psychiatric Evaluation center (NEPEC)-supported Intensive Psychiatric Community Care (IPCC) teams. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.
528$^\psi$		2780.00	TELEPHONE/ HOMELESS MENTALLY ILL	Records patient consultation or medical care management, advice, and/or referral provided by staff funded through the Health Care for Homeless Veterans (HCHV) programs (except for those programs assigned to other specific stop codes, such as the HUD-VASH program) to homeless veterans with mental and or substance abuse disorders, or to family members of these veterans. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
529		2312.00	HCHV/HMI	Records any visit provided by clinical staff funded through a HCHV program (except for the programs with specific stop codes, such as the HUD-VASH program) to Homeless Chronically Mentally Ill (HCMI) veterans with mental and/or substance abuse disorders or family members of such veterans.
530$^\psi$		2780.00	TELEPHONE/ HUD-VASH	Records patient consultation or medical care management, advice, and/or referral provided by telephone staff of the HUD-VASH program to homeless veterans who are being case-managed in the HUD-VASH program, or who are being screened for placement, and to family members of these veterans. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.
531+		2331.00	MENTAL HEALTH PRIMARY CARE TEAM - INDIVIDUAL	Records individual care provided to patients assigned to a Mental Health Primary Care Team, characterized by a coordinated interdisciplinary approach consisting of; (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity of care; and, (f) patient and non- professional care giver education and training. Includes clinical, ancillary and administrative services.
532+		2315.00	PSYCHOSOCIAL REHABILITATION INDIVIDUAL	Records individual services provided to aid veteran's successful community re-entry, i.e., case management, advocacy, counseling, social and living skills development, interviews, etc. (For use by Psychosocial Rehabilitation Programs and other programs where more specific DSS Identifiers do not exist.)
535		2315.00	MH VOCATIONAL ASSISTANCE INDIVIDUAL	Records individual patient visit for vocational testing, assessment, guidance, counseling, or hands-on treatment provided by Vocational Rehabilitation (Voc Rehab) Therapy programs for veterans with psychosocial rehabilitation needs.
536$^\psi$		2780.00	TELEPHONE/ MH VOCATIONAL ASSISTANCE	Records vocational services provided via telephone for veterans with psychosocial rehabilitation needs.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
537$^\psi$		2780.00	TELEPHONE/ PSYCHOSOCIAL REHABILITATION	Records services provided via telephone to aid veterans' community re-entry, i.e., case management, advocacy, counseling, social and living skills development, interviews, etc. (For use by psychosocial rehabilitation programs where more specific DSS Identifiers do not exist).
540		2313.00	PCT POST - TRAUMATIC STRESS INDIVIDUAL	Records consultation, evaluation, and/or follow-up provided to a patient with a diagnosis of post traumatic stress syndrome. Treatment is provided by a Specialty Multidisciplinary clinical team. PCT.
542$^\psi$		2780.00	TELEPHONE/ PTSD	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the PCT. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual.
543 - Inactivated 4/1/97		2316.00	TELEPHONE/ ALCOHOL DEPENDENCE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the alcohol dependence treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal their identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
544 - Inactivated 4/1/97		2316.00	TELEPHONE/ DRUG DEPENDENCE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the dependence treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual.
545$^\psi$		2780.00	TELEPHONE/ SUBSTANCE ABUSE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the substance abuse treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual.
	545461$^\psi$	2780.00	TELEPHONE SUBSTANCE ABUSE TREATMENT - ALCOHOL DEPENDENCE	Use for Alcohol Dependence Treatment Phone Calls. Using the full definition for 545.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	545469$^\psi$	2780.00	TELEPHONE SUBSTANCE ABUSE TREATMENT - DRUG DEPENDENCE	Use for Drug Dependence Treatment Phone Calls. Using the full definition for 545.
546$^\psi$		2780.00	TELEPHONE/IPCC	Records patient consultation or psychiatric care, management, advice and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the special psychiatry service. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.
547		2316.00	INTENSIVE SUBSTANCE ABUSE TREATMENT	Records visits for intensive substance abuse services provided by substance abuse treatment program staff. Treatment program is usually an interdisciplinary outpatient program designed for substance abuse clients based upon day hospital, day treatment, psychosocial rehabilitation models (may include outpatient detoxification). Patients generally are expected to participate in a program of 3 or more hours per day, 3 days a week at a minimum.
	547461		INTENSIVE SUBSTANCE ABUSE TREATMENT- ALCOHOL DEPENDENCE	Use only for an intensive substance abuse treatment program exclusively treating alcohol-dependent clients. (See the full definition for 547).

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	547469		INTENSIVE SUBSTANCE ABUSE TREATMENT - DRUG DEPENDENT	Use only for an intensive substance abuse treatment program exclusively treating drug-dependent clients. (See the full definition for 547).
550+		2310.00	MENTAL HEALTH CLINIC (GROUP)	Records services assigned to a group of outpatients by any clinical specialty assigned to the Mental Health Clinic.
551 - Inactivated 4/1/97		5117.00	IPCC COMMUNITY CLINIC/ DAY PROGRAM VISIT	Only VA medical centers approved to participate in the IPCC Program may use this code. This records visits with patients and/or their families or caregivers to IPCC staff at identified IPCC satellite clinics, IPCC storefronts or IPCC offices not on the VA medical center grounds or at a VA outpatient clinic. Includes clinical and administrative staff. Additional stop codes may not be taken for the same workload.
552+		5117.00	IPCC COMMUNITY VISIT	Only VA medical centers approved to participate in the IPCC program may use this code. This records visits with patients and/ or their families or caregivers by IPCC staff at all locations not on the VA medical center grounds, at a VA outpatient or at IPCC satellite clinics, IPCC storefronts or IPCC offices. Includes clinical and administrative services provided IPCC patients by IPCC staff. Additional stop codes may not be taken for the same workload.
553+		2310.00	DAY TREATMENT-GROUP	Records treatment to a group of patients with mental health and psychogeriatric disorder, for ongoing and rehabilitation services. Patients require clinical assistance and support up to 4 to 8 hours per day, 3 to 7 days per week for continuing care and community maintenance. Day treatment clinics serve patients who are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting. Includes clinical and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
554+		2310.00	DAY HOSPITAL-GROUP	Records treatment to a group of patients for evaluation, treatment, and rehabilitation of patients with mental health disorders, who require intensive diagnostic and treatment services up to 4 to 8 hours per day, 3 to 7 days per week. Day hospital clinics are typically prioritized along the lines of <u>crisis treatment, transitional care, and rehabilitation</u> as opposed to continuing care and community maintenance. Patients are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services.
555 - Inactivated 4/1/97		2316.00	DRUG DEPENDENCE - GROUP	Records patients visits for group follow-up, treatment, and evaluation by a facility's formal Drug Dependence Treatment Program. Includes clinical and administrative services.
556 - Inactivated 4/1/97		2316.00	ALCOHOL TREATMENT - GROUP	Records patient visits for a group follow-up, treatment, and evaluation by a facility's formal Alcohol Dependent Treatment Program. Includes clinical and administrative services.
557		2310.00	PSYCHIATRY - GROUP	Records treatment and follow-up provided to a group of veterans by a physician trained in mental, emotional and behavioral disorders and may prescribe medications. Includes physician services and administrative services.
558		2310.00	PSYCHOLOGY - GROUP	Records treatment and follow-up provided to a group of patients by a psychologist trained in mental, emotional, and behavioral disorders. Includes psychologist services and administrative services.
559		2314.00	PSYCHOSOCIAL REHABILITATION GROUP	Records group services provided to aid veterans' successful community re-entry, i.e., case management, advocacy, counseling, social and living skills development, interviews, etc. (For use by psychosocial rehabilitation programs where more specific DSS Identifiers do not exist).
560		2316.00	SUBSTANCE ABUSE - GROUP	Records patient visits for group follow-up, treatment, and/or evaluation by a facility's formal Substance Abuse Treatment Program. Includes clinical and administrative services.

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DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	560461	2316.00	GROUP SUBSTANCE ABUSE: ALCOHOL DEPENDENCE	Records patient visits for group follow-up, treatment, and/or evaluation by a facility's formal Substance Abuse Treatment Program. Includes clinical and administrative services. For a program exclusively treating alcohol-dependent clients.
	560469	2316.00	GROUP SUBSTANCE ABUSE: DRUG DEPENDENCE	Records patient visits for group follow-up, treatment, and/or evaluation by a facility's formal Substance Abuse Treatment Program. Includes clinical and administrative services. For a program exclusively treating drug-dependent clients.
561		2313.00	PCT-POST TRAUMATIC STRESS GROUP	Records group therapy provided to patients with diagnosis of PTSD. Treatment is provided by Specialty Multidisciplinary clinical team. PC.
562		2311.00	PTSD - INDIVIDUAL	Records consultation, evaluation, follow-up, and/or treatment provided to an individual with PTSD. This activity does not take place through a designated PTSD clinical team. Includes clinical and administrative services.
563+		2330.00	MENTAL HEALTH PRIMARY CARE TEAM - GROUP	Records care provided to a group of patients assigned to a Mental Health Primary Care Team characterized by a coordinated interdisciplinary approach consisting of; (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity of care; and (f) patient and non- professional care giver education and training. Includes clinical and administrative services.
564++		2311.00	INTENSIVE COMMUNITY CASE MANAGEMENT (ICCM)	Records visits with patients and/or their families or caregivers by ICCM staff at all locations. Includes clinical and administrative services provided ICCM patients by ICCM staff. NOT to be used for visits to NEPEC-supported IPCC teams.

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DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
573		2314.00	MH INCENTIVE THERAPY-GROUP	Records patient visit for, or work activity in, the Incentive Therapy Program provided by Psychology, Psychiatry, Social Work, Domiciliary or any other service other than PM&RS. This is a rehabilitation program provided under 38 U.S.C. 618(A) which authorizes assignment of patients to various in-hospital work situations. Pay scale is up to one-half minimum wage. This program is supported by medical care funds.
574+		2314.00	MH COMPENSATED WORK THERAPY (CWT) GROUP	Records patient visit for evaluation for, or work activity in, the CWT/Veterans Industries (VI) Program provided by Psychology, Psychiatry, Social Work, Domiciliary or other service other than PM&RS. Involves work subcontracted from and paid for by public and/ or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the Special Therapeutic and Rehabilitation Activities Fund (STRAF) account at the VA facility.
	574513 – Inactivated 10/1/98	2314.00‡	MH CWT/ SUBSTANCE ABUSE	Records CWT patient visits by outpatients who are in a Substance Abuse Program that was enhanced to Support CWT. Included here are evaluations for, work activity in, the CWT/VI Program provided by Psychology, Psychiatry, Social Work, Domiciliary or other service other than PM&RS. Involves work subcontracted from and paid for by public and/or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the STRAF account at the VA facility.
575		2314.00	MH VOCATIONAL ASSISTANCE GROUP	Records patient visit for vocational testing, assessment, guidance, counseling, or hands-on treatment provided by the Vocational Rehabilitation Therapy Program provided by Psychology, Psychiatry, Social Work, Domiciliary or any other service other than PM&RS.
576		2311.00	PSYCHO-GERIATRIC CLINIC, INDIVIDUAL	Records individual evaluation, consultation, and/or treatment by clinical staff in a designated psycho-geriatric outpatient clinic. Includes clinical and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
577		2310.00	PSYCHO-GERIATRIC CLINIC, GROUP	Records treatment, evaluation, and/or rehabilitation provided to a group of patients in a designated psycho-geriatric clinic. Includes clinical and administrative services.
578		2310.00	PSYCHO-GERIATRIC DAY PROGRAM	Records all patient visits in a local or nationally designated psychogeriatric day program for ongoing treatment and rehabilitation of psychogeriatric disorders. Includes clinical and administrative services.
579$^\psi$		2780.00	TELEPHONE/ PSYCHO-GERIATRICS	Records patient consultation of medical care management, advice, and/or referral provided by telephone contact between patient or patient's relative and/or caregivers and the clinical and professional staff assigned to a designated psychogeriatric program. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
580+		2310.00	PTSD DAY HOSPITAL	Records psychiatric treatment to an individual or group of patients diagnosed with post traumatic stress disorders, who require <u>intensive diagnostic and treatment services</u> up to 4 to 8 hours per day, 3 to 7 days per week. PTSD day hospital clinics typically are prioritized along the lines of crisis treatment, transitional care, and rehabilitation as opposed to continuing care and community maintenance. Patients are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
581+		2310.00	PTSD DAY TREATMENT	Records therapeutic psychiatric outpatient services to an individual or a group of patients diagnosed with PTSD, who require clinical assistance and support up to 4 to 8 hours per day, 3 to 7 days per week for <u>continuing care and</u> <u>community maintenance</u>. Patients in day treatment are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting.
589++		2311.00	NON-ACTIVE DUTY SEX TRAUMA	Records patient visit for appropriate care and services to a veteran for a psychological injury, illness or other condition determined to be the result of a physical assault, battery, or harassment experienced during childhood; any pre-active and post active duty status (<u>Not On Active Duty</u>). Services include clinical and administrative services. (Public Law 102-585) If Trauma occurred on Active Duty, use 524.
590		2319.00	COMMUNITY OUTREACH TO HOMELESS VETS BY STAFF OTHER THAN HCHV AND DCHV PROGRAMS	Records outreach services to veterans carried out by VA staff other than designated staff of the HCHV or DCHV programs.
602		2410.00	CHRONIC ASSISTED HEMODIALYSIS TREATMENT	Records visit for the purpose of receiving hemodialysis. Includes clinical and administrative services.
603		2410.00	LIMITED SELF CARE HEMODIALYSIS TREATMENT	Records visits where patient assists in hemodialysis and requires only limited staff assistance.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
604		2410.00	HOME/SELF HEMODIALYSIS TRAINING TREATMENT	Records outpatient for the purpose of education and/or training in the techniques of performing hemodialysis dialysis at veteran's residence or receiving dialysis at a facility. Includes clinical and administrative services.
606		2410.00	CHRONIC ASSISTED PERITONEAL DIALYSIS	Records outpatient visit for the purpose of receiving peritoneum dialysis. Includes clinical and administrative services.
607		2410.00	LIMITED SELF CARE PERITONEAL DIALYSIS	Records visit where patient actively assists in own peritoneal dialysis treatments and requires only limited staff assistance.
608		2410.00	HOME/SELF PERITONEAL DIALYSIS TRAINING	Records outpatient visit for the purpose of education and/or training in the techniques of performing peritoneal dialysis at veteran's residence or peritoneal dialysis at a facility. Includes clinical and administrative services.
610		N/A*	CONTRACT DIALYSIS	Records visit for Contract Dialysis. Includes services on contract for Contract Dialysis and related Medical services, provided to veteran patients.
611$^{\psi}$		2780.00	TELEPHONE/ DIALYSIS	Records patient consultation or medical care management and/or advice referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the Dialysis treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual.

TABLE F, FY99 Outpatient DSS Identifier Definitions (inclusive of Change 3, Effective on VistA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	*701 thru 711	N/A*	DSS Credit Pairs	Generally used as secondary stop code for modifier to collect special statistics (with a primary stop code like 301, or 323).
	701	N/A*	HYPERTENSION SCREENING	Records outpatient visit for the purpose of measurement, consultation, and/or education relating to controlling high blood pressure. Includes clinical and administrative services.
	702	N/A*	CHOLESTEROL SCREENING	Records outpatient visit for the purpose of consultation and/or education in methods of improving serum cholesterol levels. Includes clinical and administrative services.
	703	N/A*	MAMMOGRAM	Records outpatient visit for the purpose of mammary gland x-ray. Includes clinical and administrative services.(Age restriction eliminated.)
	704	N/A*	PAP TEST	Records female outpatient visit for the purpose of cervical/vaginal examination for cancer screening. Includes clinical and administrative services. (Age restriction eliminated.)
	705	N/A*	FOBT - GUIAC SCREENING	Records outpatient visit for the purpose of testing for blood in stool. Includes clinical and administrative services.
	706	N/A*	ALCOHOL SCREENING	Records outpatient visit for the purpose of screening veterans for potential admission into the alcohol treatment unit/program. Includes clinical and administrative services.
	707	N/A*	SMOKING CESSATION	Records outpatient visit for the purpose of counseling/instruction in various methods to stop smoking. Includes clinical and administrative services.
	708+	N/A*	NUTRITION	Records outpatient visit for the purpose of consultation/education in dietary/ nutritional health (including weight control). Includes clinical and administrative services.
	709	N/A*	PHYSICAL FITNESS/ EXERCISE COUNSELING	Records outpatient visit for the purpose of consultation/education in proper exercise and fitness techniques. Includes clinical and administrative services.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	710	N/A*	INFLUENZA IMMUNIZATION	Records outpatient visit for the purpose of influenza immunization injection. Includes clinical and administrative services. Is not restricted to veterans.
	711	N/A*	INJURY COUNSEL/ SEAT BELT USAGE	Records outpatient consultation and/or education in prevention of injuries. Includes clinical and administrative services.
725		5115.00	DOMICILIARY OUTREACH SERVICES	Records visit made by VA domiciliary staff relating to case-finding and/or contract services to homeless veterans. Includes clinical and administrative services.
726		5115.00	DOMICILIARY AFTERCARE - COMMUNITY	Records visit made by VA domiciliary staff for care to discharged domiciliary patients being followed in the community as part of a domiciliary discharge plan. Includes clinical and administrative services.
727		2750.00	DOMICILIARY AFTERCARE-VA	Records outpatient visit of discharged domiciliary patients to a VA domiciliary follow-up clinic for care as part of a domiciliary discharge plan. Includes clinical and administrative services.
728		2111.00‡	DOMICILIARY ADMISSION SCREENING SERVICES	Records all activities associated and involved in the admitting and screening process of patients applying for Domiciliary care. This includes administrative, physician, nursing and ancillary services.
729ψ		2780.00	TELEPHONE/ DOMICILIARY	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and/or professional staff assigned to the VA Domiciliary staff. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.

TABLE F, FY 99 Outpatient DSS Identifier Definitions (Effective on VISTA Software 10/1/97)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
731++		N/A*	PRRTP- GENERAL CARE	The use of this code is <u>optional</u> and should <u>only</u> be used for those facilities who desire to identify residential care products via ECS. (Do <u>not</u> use for scheduling or cost purposes.)
900 - inactivate 10/1/98		N/A*	SPECIAL SERVICES	Use in conjunction with appropriate credit stop code when an ambulatory procedure is performed. Also need to annotate the appropriate CPT code for the procedure.
999$^\psi$		2610.00	EMPLOYEE HEALTH	Records visit of employee to a designated employee health service. Includes physician services and clinical services and administrative services.
	999510+		PSO-EAP	Optional

ATTACHMENT K

**ANCILLARY STOP CODES AND MEDICAL ADMINISTRATION SERVICE (MAS)
EXEMPT STOP CODES**

NOTE: Other lists of value in analyzing Department of Veterans Affairs (VA) medical center Decision Support System (DSS) Identifiers use Attachment L or in creating detailed DSS outpatient clinic feederkeys use Attachment M.

DSS IDENTIFIER		DESCRIPTION
Ancillary	**Exempt♦**	
104	*104*	PULMONARY FUNCTION
105	*105*	X-RAY
106	*106*	Electroencephalogram (EEG)
107	*107*	Electrocardiogram (EKG)
	107473	ECHOCARDIOGRAM
108	*108*	LABORATORY
109	*109*	NUCLEAR MEDICINE
115	*115*	ULTRASOUND
116++		RESPIRATORY THERAPY
126	*126*	EVOKED POTENTIAL
127	*127*	TOPOGRAPHICAL BRAIN MAPPING
128	*128*	PROLONGED VIDEO-EEG
	144	RADIONUCLIDE THERAPY
145	*145*	PHARMACOLOGY/PHYSIOLOGIC NUCL. MYOCARDIAL PERFUSION STUDIES
146	*146*	Position Electron Transformation (PET)
	149	TRADIATION THERAPY TREATMENT
150	*150*	COMPUTERIZED TOMOGRAPHY (CT)
151	*151*	MAGNETIC RESONANCE IMAGING (MRI)
152	*152*	ANGIOGRAM CATHETERIZATION
153	*153*	INTERVENTIONAL RADIOGRAPHY

♦**Exempt:** This condition is set-up by MAS software when these codes are used <u>without</u> credit pairs that are non-exempt. When the MAS software does not automatedly make these exempt, Local VA medical centers can use the "Other" International Classification of Diseases, 9th Edition, Clinical Modification (ICD-9) code.

++ New DSS Identifier

DSS IDENTIFIER		
Ancillary	**Exempt♦**	**DESCRIPTION**
160	*160*	CLINICAL PHARMACY
	170	Hospital Based Home care (HBHC) - PHYSICIAN
212		ELECTROMYOGRAM (EMG)
	421	VASCULAR LABORATORY
423		PROSTHETIC SUPPLY ORDERING SERVICES
	703	MAMMOGRAM
	999	EMPLOYEE HEALTH

NOTE: Caution should be used when pairing exempt DSS identifiers with non-exempt, as the use of these types of pairings could result in rejects being generated when transmitting workload to the Austin Automation Center (AAC).

♦**Exempt:** This condition is set-up by MAS software when these codes are used <u>without</u> credit pairs that are non-exempt. When the MAS software does not automatedly make these exempt, Local VA medical centers can use the "Other" ICD-9 code.

ATTACHMENT L

TELEPHONE STOP CODE LIST

NOTE: Work from these stop codes is always <u>non-billable</u> in Medical Care Cost Recovery (MCCR).

DSS ID NUMBER	DSS ID PAIR	DSS ID NAME
103		TELEPHONE TRIAGE
147		TELEPHONE/ANCILLARY
	147209	TELEPHONE Visual Impairment Service Team (VIST)
148		TELEPHONE/DIAGNOSTIC
169		TELEPHONE/CHAPLAIN
178		HBPC/TELEPHONE
181		TELEPHONE/DENTAL
216		TELEPHONE/REHAB AND SUPPORT
	216203	TELEPHONE AUDIOLOGY REHAB SERVICE SUPPORT
	216204	TELEPHONE SPEECH REHAB SUPPORT
324		TELEPHONE/MEDICINE
325		TELEPHONE/NEUROLOGY
326		TELEPHONE/GERIATRICS
424		TELEPHONE/SURGERY
425		TELEPHONE/PROSTHETICS/ORTHOTICS
428		TELEPHONE/OPTOMETRY
527		TELEPHONE/GENERAL PSYCHIATRY
	527564	TELEPHONE Intensive Community Case Management (ICCM)
528+		TELEPHONE/HOMELESS MENTALLY ILL
530+		TELEPHONE/ Department of Housing and Urban Development – VA Shared Housing (HUD-VASH)
536++		TELEPHONE/ Mental Health (MH) VOCATIONAL ASSISTANCE
537++		TELEPHONE/ PSYCHOSOCIAL REHABILITATION
542		TELEPHONE/Post traumatic Stress Disorder (PTSD)
545		TELEPHONE/SUBSTANCE ABUSE
	545461**	TELEPHONE/SUBSTANCE ABUSE-ALCOHOL DEPENDENCE
	545469**	TELEPHONE SUBSTANCE ABUSE-DRUG DEPENDENCE
546+		TELEPHONE/Intensive Psychiatric Community Care (IPCC)
579+		TELEPHONE/ PSYCHOGERIATRICS
611		TELEPHONE/DIALYSIS
729+		TELEPHONE/DOMICILIARY

+ Changed DSS Identifier description
++ New DSS Identifier
** Amended use of a DSS Identifier

ATTACHMENT M

ALWAYS NON-BILLABLE DECISION SUPPORT SYSTEM (DSS) IDENTIFIERS

DSS ID NUMBER	DSS ID PAIR	DSS ID NAME
**Telephone♦♦**		
103		TELEPHONE TRIAGE
147		TELEPHONE/ANCILLARY
148		TELEPHONE/DIAGNOSTIC
169		TELEPHONE/CHAPLAIN
178		Hospital Based Home care (HBHC)/TELEPHONE
181		TELEPHONE/DENTAL
	208466	Domiciliary (DOM) Compensated Work Therapy (CWT) (not billable)
	213466	VETS ED/TRNG DOM (not billable)
216		TELEPHONE/Rehabilitation (REHAB) AND SUPPORT
	216210	SPINAL CORD INJURY TELEPHONE SUPPORT
324		TELEPHONE/MEDICINE
325		TELEPHONE/NEUROLOGY
326		TELEPHONE/GERIATRICS
424		TELEPHONE/SURGERY
425		TELEPHONE/PROSTHETICS/ORTHOTICS
428		TELEPHONE/OPTOMETRY
527		TELEPHONE/GENERAL PSYCHIATRY
528		TELEPHONE/HOMELESS MENTALLY ILL (HMI)
530		TELEPHONE/Department of Housing and Urban Development (HUD) – VA Shared Housing (VASH)
536		TELEPHONE/MH VOCATIONAL ASSISTANCE
537		TELEPHONE/PSYCHOSOCIAL REHABILITATION
542		TELEPHONE/Post Traumatic Stress Disorder (PTSD)
545		TELEPHONE/SUBSTANCE ABUSE
	545461	TELEPHONE SUBSTANCE ABUSE TREATMENT – ALCOHOL DEPENDENCE
	545469	TELEPHONE SUBSTANCE ABUSE TREATMENT – DRUG DEPENDENCE
546		TELEPHONE/Intensive Psychiatric Community Care (IPCC)
579		TELEPHONE/PSYCHOGERIATRICS
611		TELEPHONE/DIALYSIS
729		TELEPHONE/DOMICILIARY

♦♦ Telephone is not billable to the insurance carrier, nor to the veteran for an Outpatient Therapy (OPT) copay; however, if the call results in a new prescription being written, prescription copayment charges are applicable.

Telephone♦♦		
DSS ID NUMBER	**DSS ID PAIR**	**DSS ID NAME**
OTHER		
524		SEXUAL TRAUMA COUNSELING
525		WOMEN'S STRESS DISORDER TREATMENT TEAMS
999		EMPLOYEE HEALTH
	999510	Psychology (PSO) - Employee Assistance Program (EAP)
	510474	PSYCHOLOGY RESEARCH

♦♦ Telephone is not billable to the insurance carrier, nor to the veteran for an Outpatient Therapy (OPT) copay; however, if the call results in a new prescription being written, prescription copayment charges are applicable.

ATTACHMENT N

SOMETIMES NON-BILLABLE CLINICS WITH THESE STOPS, MAY NEED TO BE SET UP AS "NOT BILLABLE" ON MEDICAL ADMINISTRATION SERVICE (MAS) AUTOBILLER.

DSS ID NUMBER	DSS ID PAIR	DSS ID NAME
SCREENINGS		
120		HEALTH SCREENING
	701	HYPERTENSION SCREENING
	702	CHOLESTEROL SCREENING
	706	ALCOHOL SCREENING
NUTRITION		
123		NUTRITION/DIETETICS/INDIVIDUAL
124		NUTRITION/DIETETICS/GROUP
175		Home Based Primary Care (HBPC) – DIETICIAN
CHAPLAIN		
165		BEREAVEMENT COUNSELINGχ
166		CHAPLAIN SERVICE – INDIVIDUALχ
167		CHAPLAIN SERVICE – GROUPχ
168		CHAPLAIN SERVICE – COLLATERALχ
SOCIAL WORK		
125		SOCIAL WORK SERVICE
173		HBPC – SOCIAL WORKER
THERAPY		
174		HBPC – THERAPIST
202		RECREATION THERAPY SERVICE
206		OCCUPATIONAL THERAPY
207		Physical Medicine and Rehabilitation Service (PM&RS) INCENTIVE THERAPY
208		PM&RS COMPENSATED WORK THERAPY
574		Mental Health (MH) COMPENSATED WORK THERAPY (CWT) GROUP
	574513	MH CWT/SUBSTANCE ABUSE
PHARMACY		
160		CLINICAL PHARMACY

χ In general these services are not billed. However, when chaplain professionals provide in-depth substance abuse counseling, co-lead mental health groups, perform specific family, unemployment, or crisis counseling roles, such work may be billable. States vary in their rules regarding reimbursement of clergy health professionals without mental health (non-clergy counseling) certifications. Each Veterans Integrated Service Network (VISN) and Department of Veterans Affairs (VA) medical center will need to find out the rules in the relevant State and bill clinic work for those stops accordingly. As a safety measure, clinics in these stops should all be set as "not billed" and Medical Care Cost Funding Program can review specific care for billable status.

SCREENINGS		
DSS ID NUMBER	**DSS ID PAIR**	**DSS ID NAME**
EDUCATION		
	306117	DIAB DM ED
	604	HOME/SELF HEMODIALYSIS TRAINING TREATMENT
	608	HOME/SELF PERITONEAL DIALYSIS TRAINING
	711	INJURY COUNSEL/SEAT BELT USAGE
	707	SMOKING CESSATION
	708	NUTRITION
	709	PHYSICAL FITNESS/EXERCISE COUNSELING
117		NURSING
	117473	Purified Protien Derivated (PPD) CLINIC (Tuberculosis)
	117710	FLUSHOTτ
121		RESIDENTIAL CARE PROGRAM FOLLOW-UP
	710	INFLUENZA IMMUNIZATION τ
176		HBPC – CLINICAL PHARMACIST
177		HBPC – OTHER
423		PROSTHETIC SERVICES
	450485	These stop codes are used at the discretion of each facility and may be established for a variety of reasons.
	510474	PSYCHOLOGY RESEARCH
603		LIMITED SELF CARE HEMODIALYSIS TREATMENT
607		LIMITED SELF CARE PERITONEAL DIALYSIS

τ Not billable if the only reason for attending the clinic was to receive the flu shot. If a flu shot is received in connection with another clinic visit, then the flu shot is billable.

ATTACHMENT O

FISCAL YEAR 1999 SHORT DESCRIPTION
DECISION SUPPORT SYSTEM (DSS) NATIONAL SUFFIXES FOR USE
WITH DSS IDENTIFIER CREDIT PAIRS AS FEEDER KEYS FOR
DSS INTERMEDIATE PRODUCTS

CODE	SHORT DESCRIPTION
AETC	AMBULATORY EVALUATION AND TREATMENT CENTER
AFCC	AFC CLINIC
AGTO	AGENT ORANGE
AOTH	A OTHER
ASOR	AMBULATORY SURGERY PERFORMED IN AN OR
ASOT	AMBULATORY SURGERY PERFORMED IN AREA OTHER
ATEM	A TEAM
BARA	BAR 203-450 AUDIO
BOTH	B OTHER
BTEM	B TEAM
CASE	CASE MANAGEMENT
CHOL	CHOLESTEROL EDUCATION - DOUBLE PROVIDER
CMIO	CMI – CHRONICALLY MENTALLY ILL
COLL	COLLATERAL
COMN	COMMUNITY NURSING HOME
CONS	CONSULTATION
COOR	COORDINATOR
COTH	C OTHER
CPEX	COMPENSATION AND PENSION EXAMINATION
CTEM	C TEAM
DIAB	DIABETES EDUCATION
DIAG	DIAGNOSTIC PROCEDURES
DOMI	DOMICILLIARY
DOTH	D OTHER
DPGP	DOUBLE PROVIDER - GROUP OF PATIENTS
DPIN	DOUBLE PROVIDER - INDIVIDUAL PATIENT
DPRO	DENTAL PROCEDURE
DTEM	D TEAM
EAPO	EMPLOYEE ASSISTANCE
EDUC	EDUCATION – NON-MD
EOTH	E OTHER
ETEM	E TEAM
EXPX	EXPOSURE RADIATION
FAMI	FAMILY
FCAP	FCA 205-460 POOL
FLUI	FLU INJECTION
FOLU	FOLLOW-UP
FOST	FOSTER CARE CLINIC
FOTH	F OTHER

CODE	SHORT DESCRIPTION
FTEM	F TEAM
GIPR	GI PROCEDURE
GLCM	GLUCOMETER
GMED	MEDIC
GOTH	G OTHER
GTEM	G TEAM
GULF	PERSIAN GULF WAR
HCHV	HCHV IN 501 STOP
HEMP	HEMATOLOGY PROCEDURE
HOME	RESIDENTIAL SCREENING
HOTH	H OTHER
HTEM	H TEAM
INJX	INJECTION
INPT	INPATIENT
INTE	INTERN
INVA	INVASIVE PROCEDURE
IVRX	IV DRUGS/MEDS
KORE	KOREAN WAR
MISC	MISCELLANEOUS PROCEDURE
MNHM	MAIN HEALTH MAINTENANCE
NASS	NURSE ASSISTANT
NPRN	NURSE PRACTITIONER
NURS	NURSE
OFFF	OFF
ONNN	ON
OTHA	OTHER 1
OTHB	OTHER 2
OTHC	OTHER 3
OTHD	OTHER 4
OTHE	OTHER 5
OTHF	OTHER 6
OTHG	OTHER 7
OUTP	OUTPATIENT
PBED	PRE BED CARE
POWO	MEN POWS
POWW	WOMEN POWS
PREV	PREVENTION
PRIA	PRIMARY CARE TEAM 1
PRIB	PRIMARY CARE TEAM 2
PRIC	PRIMARY CARE TEAM 3
PRID	PRIMARY CARE TEAM 4
PRIE	PRIMARY CARE TEAM 5
PROC	PROCEDURE
PROP	PREOPERATIVE
PSYC	PSYCHOLOGIST
REHA	REHABILITATION

CODE	SHORT DESCRIPTION
REPE	REPEAT
RESI	RESIDENTIAL CLINIC
RSCH	RESEARCH ACTIVITIES
RXMN	MEDICATION (SUCH AS COUMADIN) MONITORING
SATA	SATELLITE CLINIC A
SATB	SATELLITE CLINIC B
SCRE	SCREENING
SCVT	SERVICE CONNECTED
SIGO	SINGLE
SOCW	SOCIAL WORKER
SPEC	SPECIAL
SPGP	SINGLE PROVIDER - GROUP OF PATIENTS
SPIN	SINGLE PROVIDER - INDIVIDUAL PATIENT
SSFU	STOP SMOKE FOLLOW-UP - INDIVIDUAL PATIENT
SSGD	STOP SMOKING GROUP DOUBLE PROVIDER
STRU	STRUCTURE LEARNING - GROUP OF PATIENTS
STUD	STUDENT PROVIDER - INDIVIDUAL PATIENT
TDIS	THOUGHT DISORDER - GROUP OF PATIENTS
TECH	TECHNICIAN
TENS	TENS CLINIC IN PM&R
TPGP	THREE OR MORE PROVIDERS - GROUP OF PATIENTS
TPIN	THREE OR MORE PROVIDERS - INDIVIDUAL PATIENT
TRAN	PRE- AND POST-TRANSPLANT CLINICAL ACTIVITIES
UNSC	UNSCHEDULED CLINIC
VIET	VIETNAM WAR
WCHR	WHEELCHAIR

ATTACHMENT P

FISCAL YEAR 1999 NATIONAL ALPHA CODE DESCRIPTION
DECISION SUPPORT SYSTEM (DSS) NATIONAL SUFFIXES FOR USE
WITH DSS IDENTIFIER CREDIT PAIRS AS FEEDER KEYS FOR
DSS INTERMEDIATE PRODUCTS

CODE	NATL ALPHA CODE DESCRIPTION
AAAA	GENERAL PURPOSE 1
BBBB	GENERAL PURPOSE 2
XXXX	GENERAL PURPOSE 3
YYYY	GENERAL PURPOSE 4
IACT	CLI FEEDER KEYS INACTIVE PRIOR TO START OF CURRENT PROCESSING YEAR
MDPA	PHYSICIAN ASSISTANT
NONC	NON-COUNT FOR DSS (USUALLY POINT TO STATES BUT USED TO AC6)
OPTC	OPHTHALMOLOGY TECHNICIAN
PHRM	CLINICAL PHARMACY
RECR	RECREATION THERAPY
KTIN	KT INDIVIDUAL
KTGR	KT GROUP
MATI	MAT INDIVIDUAL
MATG	MAT GROUP
OTIN	OT INDIVIDUAL
OTGR	OT GROUP
PTIN	PT INDIVIDUAL
PTGR	PT GROUP
SATP	SUBSTANCE ABUSE TREATMENT PROGRAM
STAT	POINT TO STATISTICS IN DSS
XREC	CLI FEEDER KEYS TRANSMITTED FOR DEMOGRAPHIC INFO TO CREATE MORE COMPLETE ENCOUNTER
ZZZZ	NO LONGER ACTIVE
IOTH	I OTHER
JOTH to	J OTHER
ZOTH	Z OTHER
ITEM	I TEAM
JTEM to	J TEAM
ZTEM	Z TEAM
APRI	A PRIMARY CARE
BPRI to	B PRIMARY CARE

CODE	NATL ALPHA CODE DESCRIPTION
ZPRI	Z PRIMARY CARE
ASAT	SATELLITE A
BSAT to	SATELLITE B
ZSAT	SATELLITE Z
ACBC	CBC A
BCBC to	CBC B
HCBC	CBC H
ANUR	RN MANAGED CLINIC A
BNUR to	RN MANAGED CLINIC B
HNUR	RN MANAGED CLINIC H
ACPX	C & P CLINIC PROFILE A
BCPX to	C & P CLINIC PROFILE B
HCPX	C & P CLINIC PROFILE H
ARED	RED TEAM A
BRED to	RED TEAM B
HRED	RED TEAM H
ABLU	BLUE TEAM A
BBLU to	BLUE TEAM B
HBLU	BLUE TEAM H
AYEL	YELLOW TEAM A
BYEL to	YELLOW TEAM B
HYEL	YELLOW TEAM H

ATTACHMENT Q

EVENT CAPTURE AND/OR TEXT INTEGRATION UTILITY (TIU)
MENU TEMPLATE

1. To enhance single-entry, and sign-on functionality for Department of Veterans Affairs (VA) medical centers using TIU (with Clinic Patient Record System (CPRS) and Event Capture System (ECS) data entry), Decision Support System (DSS)-Troy has provided guidelines on how to set-up a menu template to help you as a provider, set-up a TIU and/or ECS-combined menu so one can go directly from entry of a (TIU) progress note to entry of an (ECS) procedure. ***NOTE:*** *For DSS users, this document is available electronically on the DSS Site Managers National Bulletin Board, Site Managers Area, "smecstiu.doc".*

NOTE: Some sites have expressed a desire to enter Progress Notes for the same patients that they are entering into Event Capture. There are a couple of ways to accomplish this. One, obviously is to evoke each menu option within Event Capture and TIU independently. The other is via the use of a Menu Template.

2. The following explains generically the steps one can go through to create a Menu Template. A Menu Template in simple terms is a short cut path from one option to another. Because Menu Templates take one through several menu paths, there are a couple of things that one needs to do <u>before</u> this will work. If any of the options one is ultimately going to be using, or will go through in the Menu Template, have a Security Key, then you must have that security key assigned to you. ***NOTE:*** *Event Capture menu's require the ECALLU Security Key.* For this to work correctly, you will need to have the menus you are going through (and ultimately going to be evoking) as a secondary menu option assigned to you, as well as being on your Primary Menu Option. The facility Information Resource management Office can assist with the Security Key and assignment of the menu options.

NOTE: Your menu options are likely to be quite different from what is being shown in the example. Because of all the steps you will go through to set up a Menu Template, this has been set to show cause and effect; i.e., what happens when this is done.

3. User responses in this example are shown as bolded and underlined. A sample of what the user will see once the Menu Template is created and is actually being used has been provided. Comments to help you see where you are in this example (and what the steps mean) will be noted in bold italics. In this example, you want to be able to Enter/Edit Patient Procedures (Event Capture option) and then enter a Progress Note (TIU option, actual name is Enter of Progress Note).

NOTE: If you experience difficulty setting this, contact the National Help Desk at 1-888-596-4357. Ask the person who answers the phone to log a NOIS for the Event Capture module. Explain that you are trying to set up a Menu Template and are having problems. For assistance with the TIU options, see the Clinical Coordinator or TIU Coordinator at your facility. A copy of these instructions will be provided to the Customer Support staff for Event Capture as well as to the Bedford Technical Services Help Desk.

4. EXAMPLE

Good afternoon WILSON,TEST
    You last signed on today at 12:50

  ECS   Event Capture Menu ...
  TIU   Progress Notes User Menu ...
         Progress Notes/Discharge Summary [TIU] ...

Select LOCAL MENU FOR TRAINING Option: **TBOX User's Toolbox**

        Display User Characteristics
        Edit User Characteristics
        Electronic Signature code Edit
        Menu Templates ...
        Spooler Menu ...
        Switch UCI
        TaskMan User
        User Help

Select User's Toolbox Option: **MENU Templates**

        Create a new menu template
        Delete a Menu Template
        List all Menu Templates
        Rename a menu template
        Show all options in a Menu Template

Select Menu Templates Option: **CREATE a new menu template**

Do you want some brief instructions? [Y/N] N// **Y**

                Creating a Menu Template

   A menu template is a set of menu options that can be called at any menu prompt. This list of options will be executed from the top of the list to the bottom and then the user will be asked if he/she wants to execute that set of options again. Each menu template is stored in the person file with a unique name associated with it. A menu template is evoked by typing a left, square bracket followed by the template name. To create a menu template you will be led step-by-step through your menu trees, selecting an option from each menu presented. No jumping is allowed during the creation of a template because how you got there may be as important as the target option. All templates begin execution with your primary (sign-on) menu.

At the "Select...Option" prompt you may respond by typing:

1. An option from the menu presented to include that option in the template you are creating,
2. '?' to get a brief help message,
3. '??' to get this help message again,
4. '+' to store the template in your Person file, or
5. '^' to abandon the creation process and return to the regular menu system.

Select HELP SYSTEM action or <return>:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Once you've reviewed the help text for creating a menu template, you will see your Primary Menu displayed.

  ECS   Event Capture Menu ...
  TIU   Progress Notes User Menu ...
      Progress Notes/Discharge Summary [TIU] ...

    Choose one of the LOCAL MENU FOR TRAINING Options: <u>**EVENT Capture Menu**</u>
Begin by selecting the first menu option in the patch. Remember that to get to the Enter/Edit Patient Procedures menu (in this example), you have to go through the menu path.

Event Capture Menu   (ECMENU) This one? [Y/N] Y// <u>**Y**</u>

      CREATING A MENU TEMPLATE ***This is displayed throughout this process and lets you see where you are.***

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

  MGR   Event Capture Management Menu ...
  E   Event Capture Data Entry ...
  R   Event Capture Reports ...
  O   Event Capture Online Documentation

Choose one of the Event Capture Menu Options: <u>**E Event Capture Data Entry**</u> ***This is the sub-menu to get the Enter/Edit Patient Procedures option.***

Event Capture Data Entry   (ECENTER) This one? [Y/N] Y// <u>**Y**</u>

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Enter/Edit Patient Procedures
Batch Enter Data by Patient
Data Entry (Batch) by Procedure
Multiple Dates/Multiple Procedures Data Entry

Choose one of the Event Capture Data Entry Options: **ENTER/Edit Patient Procedures** *Now I select the Enter/Edit Patient Procedures option. This (in my example) is the only menu option I wish to execute in Event Capture.*

Enter/Edit Patient Procedures   (ECPAT) This one? [Y/N] Y// **Y**

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

I am entering a return here to go up a level, my goal is to get back to the display of my Primary Menu option.

Enter/Edit Patient Procedures
Batch Enter Data by Patient
Data Entry (Batch) by Procedure
Multiple Dates/Multiple Procedures Data Entry

Choose one of the Event Capture Data Entry Options:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Entering a return to continue to go up a level.

Enter/Edit Patient Procedures
Batch Enter Data by Patient
Data Entry (Batch) by Procedure
Multiple Dates/Multiple Procedures Data Entry

Choose one of the Event Capture Data Entry Options:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Entering a return to continue to go up a level.

MGR   Event Capture Management Menu ...
E   Event Capture Data Entry ...
R   Event Capture Reports ...
O   Event Capture Online Documentation

Choose one of the Event Capture Menu Options:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^'
to quit.

Entered a return to get to this display. Okay, now we're back to the display of my Primary Menu
option. Next I want to select the TIU option. The final menu that I will execute in TIU is the
Entry of Progress Note option.

  ECS   Event Capture Menu ...
  TIU   Progress Notes User Menu ...
       Progress Notes/Discharge Summary [TIU] ...

Choose one of the LOCAL MENU FOR TRAINING Options: **PROGRESS NOTES/Discharge
Summary [TIU]**

Progress Notes/Discharge Summary [TIU]   (TIU MAIN MENU CLINICIAN) This one?
[Y/N] Y// **Y**

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^'
to quit.

  1   Progress Notes User Menu ...
  2   Discharge Summary User Menu ...
  3   Integrated Document Management ...
  4   Personal Preferences ...

Choose one of the Progress Notes/Discharge Summary [TIU] Options: **1 Progress Notes User
Menu *This is the menu path I must take to get to the Entry of Progress Notes option.***

Progress Notes User Menu   (TIU MAIN MENU PN CLINICIAN) This one? [Y/N] Y// **Y**

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

    1   Entry of Progress Note
    2   Review Progress Notes by Patient
    2b   Review Progress Notes
    3   All MY UNSIGNED Progress Notes
    4   Show Progress Notes Across Patients
    5   Progress Notes Print Options ...
    6   List Notes By Title
    7   Search by Patient AND Title
    8   Personal Preferences ...

Choose one of the Progress Notes User Menu Options: **1 Entry of Progress Note** *This is the option that you want to execute, Entry of Progress Notes.*

Entry of Progress Note   (TIU ENTER/EDIT PN) This one? [Y/N] Y// **Y**

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

    1   Entry of Progress Note
    2   Review Progress Notes by Patient
    2b   Review Progress Notes
    3   All MY UNSIGNED Progress Notes
    4   Show Progress Notes Across Patients
    5   Progress Notes Print Options ...
    6   List Notes By Title
    7   Search by Patient AND Title
    8   Personal Preferences ...

Choose one of the Progress Notes User Menu Options: **+**

Since you've finished putting the desired options in your Menu Template, you enter a plus sign. This will store the Menu Template for future use.

You have chosen the following options in this order:

You will note that all the options and menus are displayed, this is just to show you what options you selected on your journey through the Menu Template.

LOCAL MENU FOR TRAINING   (LOCAL MENU)
Event Capture Menu   (ECMENU)
Event Capture Data Entry   (ECENTER)
Enter/Edit Patient Procedures   (ECPAT)
Event Capture Data Entry   (ECENTER)
Event Capture Menu   (ECMENU)
LOCAL MENU FOR TRAINING   (LOCAL MENU)
Progress Notes/Discharge Summary [TIU]   (TIU MAIN MENU CLINICIAN)
Progress Notes User Menu   (TIU MAIN MENU PN CLINICIAN)
Entry of Progress Note   (TIU ENTER/EDIT PN)

Are we in agreement so far? [Y/N] Y// **Y**

Fine. Since all menu-type options will be processed in the background you will only be asked to respond to the following:

This means that even though you selected all those options and menus in the setting up of the Menu Template, these area the only two options that you will be seeing once you select your Menu Template.

Enter/Edit Patient Procedures   (ECPAT)
Entry of Progress Note   (TIU ENTER/EDIT PN)

Are these the functions you want when you invoke this template? [Y/N] Y// **Y**

Enter a name (6 characters or less in UPPER CASE)
    for this template or '^' to quit: **TEST**

'TEST' it is. In the future you will start this template by typing '[TEST'

After you have finished using 'TEST' will you want it to repeat? [Y/N] N// **Y** *This means that after you've entered a Progress Note (in this example), you can continue on using the Menu Template, you would be taken to the Enter/Edit Patient Procedures option in Event Capture.*

   ECS   Event Capture Menu ...
   TIU   Progress Notes User Menu ...
        Progress Notes/Discharge Summary [TIU] ...

Select LOCAL MENU FOR TRAINING Option: **[TEST** *Here's an example of how the Menu Template will work. Don't forget the left bracket*

Loading TEST...

Enter/Edit Patient Procedures *Notice that it takes me to the Enter/Edit Patient Procedures option. You now proceed to enter the Event Capture date for this patient.*

Event Capture Locations:

1. ALBANY
2. ALBANY OPC
3. HONOLULU OC, HI
4. MURFREESBORO, TN
5. TROY

Select Number: 1

Select DSS Unit: FRIDAY   M010

Location: ALBANY
DSS Unit: FRIDAY

Select Patient: WILSON,MIKE   09-02-95   123459872   YES   SC VETERAN
SMB   SMB
Enter Date and Time of Procedure: NOW// (JAN 20, 1998@12:52) SINUSOIDAL VERTIC
AL AXIS ROTATION (#SP067)

Procedure: SINUSOIDAL VERTICAL AXIS ROTATION   (#SP067)

ENTERING A NEW PROCEDURE FOR WILSON,MIKE ...

LOCATION: ALBANY
SERVICE: MEDICINE
SECTION: MEDICINE
CATEGORY: FRI-ONE

PROCEDURE: SINUSOIDAL VERTICAL AXIS ROTATION SP067
VOLUME: 1//
ORDERING SECTION: MEDICINE//
ASSOCIATED CLINIC: TEST
ICD-9 CODE: 401.9 401.9   HYPERTENSION NOS
     ...OK? Yes// (Yes)
IN/OUTPATIENT: O OUTPATIENT
AGENT ORANGE: N NO
RADIATION EXPOSURE: N NO
ENVIRONMENTAL CONTAMINANTS: N NO
SERVICE CONNECTED: N NO
Provider: WILSON,PATRICIA   PLW   162   COMPUTER SPECIALIST
Occupation: Physician Assistant

Provider #2:

Location: ALBANY   Service: MEDICINE
Section: MEDICINE   DSS Unit: FRIDAY
Patient: WILSON,MIKE   Procedure Date: Jan 20, 1998@12:52

1. Category : FRI-ONE   WILSON, P
Procedure: SINUSOIDAL VERTICAL AXIS ROTATION (1) MEDICINE

Select a number to edit/delete, or enter N to create a New Procedure:

Location: ALBANY   Service: MEDICINE
Section: MEDICINE   DSS Unit: FRIDAY
Select Patient:

Once the data has been entered in Event Capture, you are now taken to the option to allow you to Enter a Progress Note (Entry of Progress Note option) in TIU.

            --- Clinician's Menu ---

         --- Clinician's Progress Notes Menu ---

Entry of Progress Note

Select PATIENT NAME: WILSON,MIKE   09-02-95   123459872   YES   SC
VETERAN   SMB   SMB

TITLE: CRISIS NOTE   TITLE

Creating new progress note...
      Patient Location: SURGERY
  Date/time of Admission: 06/24/97 13:10
     Date/time of Note: NOW
       Author of Note: WILSON,TEST
 ...OK? YES//

Calling text editor, please wait...
 1>TESTING ECS AND TIU USE VIA MENU TEMPLATES
 2>
EDIT Option:

Saving CRISIS NOTE with changes...
Print this note? No//   NO

You may enter another Progress Note. Press RETURN to exit.

Select PATIENT NAME:

Again? Y// **Y** *If you type a YES here, you will go back to the Event Capture option. If you type a NO here, you will be exited from the Menu Template.*